

April - 2013

Business Expense Detail Form

Date

3-6-13

Vendor

200 Beta Conference Ctr.

Amount

\$ 28.60

Public Purpose of Meeting

DISCUSS WELLNESS

PROGRAM FOR CITY EMPLOYEES

Attendees (First Name and Last Name)

Mayor Merle S. Gordon - DON SYKES

Merle S. Gordon

Approval Signature

Attach Receipt Here

700 Beta Dr  
Cleveland, OH 44143

102 Jessica

Tbl 40/1 Chk 2075 Gst 1  
Mar06'13 06:33AM

Eat In

1 HOT BRKFST 10.95  
1 HOT BRKFST 10.95

Food 21.90  
Tax 1.70  
Total 23.60

Tip: 5.00

Total: 28.60

Room #: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: Male S. Gude

Thank you for joining us today.

700 Beta Dr  
Cleveland, OH 44143

Date: Mar06'13 08:25AM  
Card Type: VISA  
Acct #: XXXXXXXXXXXX8755  
Exp Date: XX/XX  
Auth Code: 06112Z  
Check: 2075  
Table: 40/1  
Server: 102 Jessica

Subtotal: 23.60

Tip: 5.00

Total: 28.60

I Agree To Pay Above Total  
According To My Card issuer  
Agreement.

\*\* Customer Copy \*\*

Business Expense Detail Form

Date 3-15-13

Vendor Hampton Inn

Amount \$ 214.00

Public Purpose of Meeting O.D.O.T. meeting in Columbus,

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Merle S. Gorden  
Approval Signature

Attach Receipt Here

attached

Gorden, Merle           CONFIRMATION NUMBER : 86016195  3/14/2013    PAGE    1	name address	room number: 515/KXTE arrival date: 3/13/2013 10:58:00AM departure date: 3/14/2013 adult/child: 1/0 room rate: 214.00	If the debit/credit card you are using for check-in is attached to a bank or checking account, a hold will be placed on the account for the full anticipated dollar amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such funds will not be released for 72 business hours from the date of check-out or longer at the discretion of your financial institution.
	RATE PLAN: LVO HH#: AL: BONUS AL:    CAR:		
Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. In the event of an emergency, I, or someone in my party require special evacuation assistance due to a physical disability. Please indicate yes by checking here: <input type="checkbox"/>			
signature:			

date	reference	description	amount
3/13/2013	485546	GUEST ROOM EXEMPT	\$214.00
		WILL BE SETTLED TO MC *8755	\$214.00
		EFFECTIVE BALANCE OF	\$0.00
		EXPENSE REPORT SUMMARY	
		13 00:00:00 STAY TOTAL	
ROOM & TAX		\$214.00	\$214.00
DAILY TOTAL		\$214.00	\$214.00

for reservations call 1-800-hampton or visit us online at [hampton.com](http://hampton.com)
thanks.

account no.	date of charge	folio/check no. 178662    A
card member name	authorization	initial
establishment no. and location <small>establishment agrees to transmit to card holder for payment</small>	purchases & services	
	taxes	
	tips & misc.	
signature of card member <b>X</b>	total amount	0.00

Business Expense Detail Form

Date 3-18-13

Vendor PIZZAZZ

Amount \$ 22.93

Public Purpose of Meeting REVIEW OF CITY PROJECTS

Attendees ( First Name and Last Name) Mayor Merle S. Gorden - BILL GRISWOLD

DALE PEKAREK

Merle S. Gorden  
Approval Signature

Attach Receipt Here

**Pizzazz  
on the Circle**  
20680 N. Park Blvd.  
University Heights, OH 44118  
(216) 321-7272

Tab 15/1 03/18/13-A 12:06pm  
Guests 1 Shawna Table 06

1..SM PIZZAZZ SAL	7.75
1..SM CHIX SAL	8.25
1..SM CAJUN CHK SAL	8.25
2..*ICED TEA	3.90
1..*DIET PEPSI	1.95
1..UH Police 50% DISCOUNT	-15.05
(*Item shown with tax included)	

Items	29.68
Tax (or 29.68)	2.30
<b>Check Total</b>	<b>31.98</b>
<b>Discounts</b>	<b>-15.05</b>
<b>Subtotal</b>	<b>16.93</b>

Tip 6.00  
TOTAL 22.93

1.MC/xxxxxxxxxxxx8755/XXXX S A:04601Z  
GORDEN, MAYOR 7821 03/18 12:48 16.93

**Customer Copy**

15% Gratuity: 4.45  
18% Gratuity: 5.35  
20% Gratuity: 5.95

Thank you for choosing PIZZAZZ!

Order online at pizzazztogo.com

DACE P.

Bill G.

MERLE GORDEN

**Pizzazz  
on the Circle**  
20680 N. Park Blvd.  
University Heights, OH 44118  
(216) 321-7272

Tab 15 03/18/13-A 12:06pm  
Guests 1 Shawna Table 06

1..SM PIZZAZZ SA	7.75
1..SM CHIX SAL	8.25
1..SM CAJUN CHK SAL	8.25
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<b>Check Total</b>	<b>31.98</b>
<b>Discounts</b>	<b>-15.05</b>
<b>TOTAL</b>	<b>16.93</b>

SIGN A. \_\_\_\_\_

15% Gratuity: 4.45  
18% Gratuity: 5.35  
20% Gratuity: 5.95

Thank you for choosing PIZZAZZ!

Order online at pizzazztogo.com

**Business Expense Detail Form**

Date

3-24-13

Vendor

Staples

Amount

\$ 22.75

Public Purpose of Meeting

Office Supplies

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden

Approval Signature

Merle S. Gorden

Attach Receipt Here

--

**STAPLES**

that was easy.

Low prices. Every item. Every day.

5950 Mayfield Rd.

Mayfield Heights, OH 44124

(440) 684-0302

SALE 1648474 2 002 08525

0669 03/24/13 04:02

\*\*\*\*\*

YOUR OPINION COUNTS AND WILL BE REVIEWED  
BY THIS STORE'S MANAGER!

Please take a short survey  
and be entered into a monthly drawing  
for a \$5,000 Staples gift card.

NO PURCHASE NECESSARY.

Log on to [www.StaplesCares.com](http://www.StaplesCares.com)

or call 1-800-881-1723

Your survey code: 0101 4658 9990 1689

See store for rules.

Survey code expires 03/31/2013.

\*\*\*Tome nuestra encuesta en Español en  
la página de Internet o por telefono.

Consiga las reglas en la tienda.\*\*\*

\*\*\*\*\*

ITY SKU PRICE

REWARDS NUMBER 2111277741

ARC TO DO REFILL P

718103140010

3.99N

3X5 RULED NEONGRN3

718103080927

6.49N

ARC TASK PAD 7.5X2

718103141673

3.99N

ARC TO DO REFILL P

718103140010

3.99N

3X5 RULED INDXCRD

718103187473

4.29N

UBTOTAL

22.75

Tax Exempt Number 2111277741

OTAL

\$22.75

asterCard

22.75

ard No.: XXXXXXXXXXXX8755 [S]

uth No.: 06020Z

Save with Staples Brand products,  
the most trusted brand in office products.

THANK YOU FOR SHOPPING AT STAPLES !

Shop online at [www.staples.com](http://www.staples.com)

Rewards members now get: 5% back in  
rewards on everything! All products and  
services-even technology. Free shipping  
on staples.com orders. For full program  
details visit [staplesrewards.com](http://staplesrewards.com).



TOTAL ITEMS 5



Business Expense Detail Form

Date 3-26-13

Vendor SC4K

Amount \$ 150.00

Public Purpose of Meeting Fool's Frolic Event

Attendees ( First Name and Last Name) ~~Mayor Merle S. Gordon~~

Mel Jacobs

Merle S. Gordon  
Approval Signature

Attach Receipt Here

See attached

## Debbie Noble

---

**From:** info@sc4k.org  
**Sent:** Tuesday, March 26, 2013 1:21 PM  
**To:** Mayor's Office  
**Subject:** Fool's Frolic Registration

Thank you for your Fool's Frolic registration.

Please note, there are no printed admission tickets for this event. You will receive an email confirming your registration. You will receive an additional email confirming your credit card authorization.

Shoes and Clothes for Kids will provide you a tax-receipt letter by mail. If you purchased raffle tickets, your raffle ticket stub(s) will be included in your tax-receipt letter. Drawing will be held at the event and winners need not be present. Winners will be notified by phone.

Thank you for your support.

\* First Name: Melvin

\* Last Name: Jacobs

\* Daytime Phone Number: 216-464-1541

\* Email Address: [mayor@beachwoodohio.com](mailto:mayor@beachwoodohio.com) Number of Tickets @ \$150 ea: 1 Guest Names::

Number of Raffle Tickets to Purchase (1 for \$50 or 3 for \$100) :

I / we would like to sponsor this event:: no

✓ Total:: 150

Host Committee Member Name:: Merle S. Gorden Special Notes:

\* Type of Card: Mastercard

**Debbie Noble**

---

**From:** jkelsch@SC4K.ORG  
**Sent:** Tuesday, March 26, 2013 1:21 PM  
**To:** Mayor's Office  
**Subject:** Order Confirmation

**Order Results**

---

**Profile Name:** SC4K ORG  
**Transaction ID:** AA4A39-ADB95790-188D-44FB-B525-931B990F8B80  
**Date/Time:** 03/26/2013 01:21:12 PM  
**Transaction Type:** SALE  
**Approval Message:** APPROVAL  
**Approval Code:** 03401Z  
**ECI:**

**Order Section**

---

**Card Number :** 54\*\*\*\*\*8755  
**Expiration Date(MMY) :** 0114  
**Amount :** \$150.00USD

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Business Expense Detail Form

Date 3-27-13

Vendor Maggiaro's

Amount \$ 45.68

Public Purpose of Meeting LAW DEPT ISSUES &  
WORK LOAD

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Margaret Cannon

Merle S. Gorden  
Approval Signature

Attach Receipt Here

MAC  
MSG  
MAGGIANO'S

Maggiano's

Little Italy

Perfect for Any Occasion

#037 MANDYT003

03/27/13 12:10:00 #00196

CHECK #0010

\*\*\*\*\*  
YOUR OPINION MATTERS

We invite you to complete our  
GUEST EXPERIENCE SURVEY

MAGGIANO'S

YOU COULD WIN \$1,000

A WINNER EVERY DAY  
LITTLE ITALY

From browser address bar type:  
www.maggianos-survey.com

Your personal code:  
03XK 7UET PDDY

Please enter within  
the next 4 days

No purchase necessary.

Must be 18 or older.

Void where prohibited.

See website for complete rules  
and sweepstakes details.

\*\*\*\*\*  
LITTLE ITALY

2 ICED TEA	5.90
2 CHOPPED SALAD	25.00
ADD SALMON	5.00
Subtotal	35.90
Sales Tax	2.78
<b>TOTAL</b>	<b>38.68</b>

DAVIS

THANK YOU!!!

We welcome your comments.

\*\*\*

MAGGIANO'S

www.maggianos.com

(800) 983-4637

LITTLE ITALY

MAGGIANO'S

MAGGIANOS-BEACHWOOD 1796 Y

MERCHANT ID

03/27/13 13:01:59 T003

MANDY

CHK #010

CHARGE 1

MC

XXXXXXXXXXXX8755

GORDEN/MAYOR

AUTH # 04736Z

CHARGE AMOUNT 38.68

TIP AMOUNT 7.00  
TOTAL 45.68  
MAGGIANO'S  
LITTLE ITALY

GUEST COPY

WE WELCOME YOUR COMMENTS!

PLEASE CALL US AT 1-800-983-4637  
OR VISIT US AT WWW.MAGGIANOS.COM

Merle S. Evah

MAGGIANO'S

Business Expense Detail Form

Date 3-28-13

Vendor Moxie

Amount \$ 60.59

Public Purpose of Meeting ECONOMIC DEV. OPPORTUNITIES

Attendees ( First Name and Last Name) Mayor Merle S. Gorden - MAYOR SELLERS -  
MAYOR SMITH (NO. RANDALL)

Merle S. Gorden  
Approval Signature

Moxie/Red  
3355 Richmond Road  
Cleveland, Ohio

33 Diane S

Tbl 52/1 Chk 1838 Gst 3  
Mar28'13 12:32PM

1 Cobb Salad	11.75
1 add salmon	4.25
1 Fish Spec.	15.50
1 Sandwich spec	12.50
1 *Soft Drink	2.95

Subtotal	46.95
TAX	3.64
Amount Due	50.59

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie

3355 Richmond Road  
Cleveland, Ohio (216 ) 831-5599

\*\*\*\*\*

Date: Mar28'13 01:16PM

Card Type: Master Card

Acct #: XXXXXXXXXXXX8755

Card Entry: SWIPED

Trans Type: PURCHASE

Auth Code: 09612Z

Check: 1838

Table: 52/1

Server: 33 Diane S

Subtotal: 50.59

Gratuity: 10.00

Total: 60.59

Signature:

Merle S. Gorden  
\*\*\*\* Customer Copy \*\*\*\*

Business Expense Detail Form

Date 4-4-13

Vendor MOXIE

Amount \$ 40.83

Public Purpose of Meeting REVIEW OF UPCOMING  
PROJECTS FOR CITY.

Attendees ( First Name and Last Name) Mayor Merle S. Gordon - GEORGE

SMERLIAN

Merle S. Gordon  
Approval Signature

Attach Receipt Here

Moxie/Red  
3355 Richmond Road  
Cleveland, Ohio

195 Graham G

Tbl 27/1 Chk 1565 Gst 2  
Apr04'13 11:45AM

1 Moxie Burger	12.75
1 Chix Sand	12.75
1 *Soft Drink	2.95
1 Iced Tea	2.95

Subtotal	31.40
TAX	2.43
Amount Due	33.83

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie

3355 Richmond Road  
Cleveland, Ohio (216 ) 831-5599

\*\*\*\*\*

Date: Apr04'13 12:36PM

Card Type: Master Card

Acct #: XXXXXXXXXXXX8755

Card Entry: SWIPED

Trans Type: PURCHASE

Auth Code: 09756Z

Check: 1565

Table: 27/1

Server: 195 Graham G

Subtotal: 33.83

Gratuity: 7.00

Total: 40.83

Signature:

Merle S. Gordon

\*\*\*\* Customer Copy \*\*\*\*

Geo Smerliak

Business Expense Detail Form

Date 4-8-13  
Vendor BAHAMA BREEZE  
Amount \$ 61.24

Public Purpose of Meeting REVIEW OF ENTROVATION  
EVENT - & ADD PARTICIPATION REQUIRED &  
ALSO S.C.YK EVENT AT MOXIES

Attendees (First Name and Last Name) Mayor Merle S. Gordon - TRINA

TRICK - TRINA TRILL

Merle S. Gordon  
Approval Signature

Attach Receipt Here



Bahama Breeze  
3900 Orange Place  
Orange Village, OH 44122  
216-896-9081

Check # :33684-3034

Table 205

Mallory W

17:56 04/08/2013

Transaction #:893132973

Gst 3

ID # 3034 0983 3684

\*\*\*\*\*

\* We value your opinion. Please \*  
\* tell us about your dining \*  
\* experience by completing an \*  
\* online survey within 7 days of \*  
\* your visit. You could win a \*  
\* \$1,000 Grand Prize or 1 of 100 \*  
\* \$50 prizes. Winners are drawn \*  
\* monthly!!! \*

\* To complete the survey and enter \*  
\* the contest, go to \*  
\* www.BahamaBreezeSurvey.com and \*  
\* enter the ID on this receipt. \*  
\* NO PURCHASE NECESSARY. Void where \*  
\* prohibited. See Official Rules at \*  
\* www.BahamaBreezeSurvey.com. \*

\*\*\*\*\*  
(OFFER EXPIRES Apr 15, 2013)

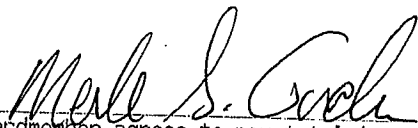
Card Number  
xxxxxxxxxxxx 8755

Auth Code  
094052  
Master Card

Check Amount 51.24

Tip .. 10.00

Total .. 61.24

X   
Cardmember agrees to pay total in  
accordance with agreement governing  
use of such card.

Guest Copy

Bahama Breeze  
3900 Orange Place  
Orange Village, OH 44122  
216-896-9081

Check # :33684-3034

Table 205

Mallory W

17:54:24 04/08/2013

Gst 3

Guest No.1

1 NO BEV  
1 CHIPOTLE BEEF BOWL-D 13.79  
1 CUP CKN TORT SOUP 3.49

Guest No.2

1 NO BEV  
1 SALMON TOSTADA 12.99

Guest No.3

1 NO BEV  
1 CUP CKN TORT SOUP 3.49  
1 CHIPOTLE BEEF BOWL-D 13.79

ID # 3034 0983 3684

\*\*\*\*\*

\* We value your opinion. Please \*  
\* tell us about your dining \*  
\* experience by completing an \*  
\* online survey within 7 days of \*  
\* your visit. You could win a \*  
\* \$1,000 Grand Prize or 1 of 100 \*  
\* \$50 prizes. Winners are drawn \*  
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\* To complete the survey and enter \*  
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\* www.BahamaBreezeSurvey.com and \*  
\* enter the ID on this receipt. \*  
\* NO PURCHASE NECESSARY. Void where \*  
\* prohibited. See Official Rules at \*  
\* www.BahamaBreezeSurvey.com. \*  
\*\*\*\*\*  
(OFFER EXPIRES Apr 15, 2013)

Duplicate Receipt  
Stored Order

Subtotal 47.55  
Sales Tax 3.69

Total 51.24

Dine In

An optional 18% gratuity will be added  
to parties of 8 or more.

Visit us at  
www.BahamaBreeze.com



Attn: Accounts Payable  
P.O. Box 22659  
Beachwood, OH 44122

## PURCHASE ORDER

Page Number 1  
P.O. Number 2013-01184  
Req. Number 13-121-0084-A  
P.O. Date 03/25/2013  
Ship Via  
Terms

**Deliver To** CITY OF BEACHWOOD  
SHIPPING AND RECEIVING  
23355 MERCANTILE ROAD  
BEACHWOOD, OH

**Vendor** 00116  
Business Card  
P.O. BOX 15796  
WILMINGTON, DE 19886-5796

ALL INVOICES MUST CONTAIN A FEDERAL TAXPAYER IDENTIFICATION NUMBER AND SHOULD BE FORWARDED TO THE BILL TO ADDRESS DETAILED ABOVE. THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL BILLS AND PACKAGES. Material on this order is from the Ohio Sales Tax and Federal Excise Taxes.

Line	Description	Account	Qty	Unit	Price/Unit	Amount
001	3 MTH BLANKET ORDER -OFFICE SUPPLIES	101.121.56290				\$200.00
002	3 MTH BLANKET ORDER-BUSINESS EXPENSE	101.121.55390				\$3,000.00

Purchase Order Total: \$3,200.00

FOR MAYOR'S CREDIT CARD 4/1/13-6/30/13

### DIRECTOR OF FINANCE CERTIFICATE

It is hereby certified that the amount required to meet and/or satisfy the contract, agreement, obligation, payment or expenditure for the above, has been lawfully appropriated or authorized or directed for such purpose and is in the Treasury or is in the process of collection and is free from any obligation or certification now outstanding.

  
DIRECTOR OF FINANCE



Attn: Accounts Payable  
P.O. Box 22659  
Beachwood, OH 44122

## PURCHASE ORDER

Page Number 1  
P.O. Number 2013-00001  
Req. Number 12-121-0047-A  
P.O. Date 01/03/2013  
Ship Via  
Terms

**Deliver To** CITY OF BEACHWOOD  
SHIPPING AND RECEIVING  
23355 MERCANTILE ROAD  
BEACHWOOD, OH

**Vendor** 00116  
Business Card  
P.O. BOX 15796  
WILMINGTON, DE 19886-5796

ALL INVOICES MUST CONTAIN A FEDERAL TAXPAYER IDENTIFICATION NUMBER AND SHOULD BE FORWARDED TO THE BILL TO ADDRESS DETAILED ABOVE. THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL BILLS AND PACKAGES. Material on this order is from the Ohio Sales Tax and Federal Excise Taxes.

Line	Description	Account	Qty	Unit	Price/Unit	Amount
001	OFFICE SUPPLIES	101.121.56290				\$200.00
002	BUSINESS EXPENSES	101.121.55390				\$3,000.00

Purchase Order Total: \$3,200.00

THREE MONTH BLANKET FOR MAYOR'S CREDIT CARD FOR OFFICE SUPPLIES & BUSINESS EXPENSES  
FROM: 1/2/13 TO 3/31/13

### DIRECTOR OF FINANCE CERTIFICATE

It is hereby certified that the amount required to meet and/or satisfy the contract, agreement, obligation, payment or expenditure for the above, has been lawfully appropriated or authorized or directed for such purpose and is in the Treasury or is in the process of collection and is free from any obligation or certification now outstanding.

  
\_\_\_\_\_  
DIRECTOR OF FINANCE

CITY OF  
*Beachwood*

Attn: Accounts Payable  
P.O. Box 22659  
Beachwood, OH 44122

## PURCHASE ORDER

Page Number 1  
P.O. Number 2013-00015  
Req. Number 12-131-2123-A  
P.O. Date 01/03/2013  
Ship Via  
Terms

**Deliver To** CITY OF BEACHWOOD  
SHIPPING AND RECEIVING  
23355 MERCANTILE ROAD  
BEACHWOOD, OH

**Vendor** 03961  
Civic / Community Functions

ALL INVOICES MUST CONTAIN A FEDERAL TAXPAYER IDENTIFICATION NUMBER AND SHOULD BE FORWARDED TO THE BILL TO ADDRESS DETAILED ABOVE. THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL BILLS AND PACKAGES. Material on this order is from the Ohio Sales Tax and Federal Excise Taxes.

Line	Description	Account	Qty	Unit	Price/Unit	Amount
001	CIVIC/COMMUNITY FUNCTIONS	101.131.55340				\$14,850.00

Purchase Order Total: \$14,850.00

FOR MAYOR & COUNCIL AND/OR THEIR DESIGNEES

PER ORDINANCE #: 2011-59

PO REVISED 4/3/13 TO REDUCE PO AMOUNT BY \$150.00 FOR PAYMENT MADE IN ERROR ON BUSINESS CARD BLANK ~~E~~

### DIRECTOR OF FINANCE CERTIFICATE

It is hereby certified that the amount required to meet and/or satisfy the contract, agreement, obligation, payment or expenditure for the above, has been lawfully appropriated or authorized or directed for such purpose and is in the Treasury or is in the process of collection and is free from any obligation or certification now outstanding.

*David A. Papp*  
\_\_\_\_\_  
DIRECTOR OF FINANCE

FEB 2013

Business Expense Detail Form

Date

1-9-13

Vendor

Moxie

Amount

\$ 117.03

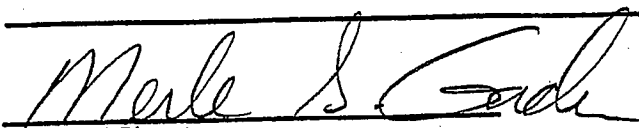
Public Purpose of Meeting

GENERAL REVIEW OF  
1 PAD INSTRUCTIONAL TRAINING G.

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden

Tina Turick Mel Jacobs Rochelle Hecht Lori DeVore

  
Approval Signature

Attach R

Moxie/Red  
3355 Richmond Road  
Cleveland, Ohio

195 Graham G

Tbl 45/1 Chk 1490 Gst 5  
Jan09'13 12:55PM

1 Tomato Bisque	4.00
1 Greek w/Beef	14.75
1 Cobb w/ Beef	15.75
1 Salmon/Cobb	15.75
1 Wedge/Beef	14.75
1 Thai Beef salad	13.25
4 Iced Tea	11.80

Subtotal	90.05
TAX	6.98
Amount Due	97.03

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie

3355 Richmond Road  
Cleveland, Ohio (216 ) 831-5599  
\*\*\*\*\*

Date: Jan09'13 01:57PM

Card Type: Master Card

Acct #: XXXXXXXXXXXX8755

Card Entry: SWIPED

Trans Type: PURCHASE

Auth Code: 02463Z

Check: 1490

Table: 45/1

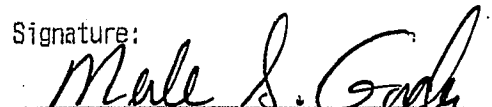
Server: 195 Graham G

Subtotal: 97.03

Gratuity: 20.00

Total: 117.03

Signature:

  
\*\*\*\*\* Customer Copy \*\*\*\*\*

Business Expense Detail Form

Date 1-14-13  
 Vendor BRUEGGERS  
 Amount \$ 8.30

Public Purpose of Meeting JOB POSTING IN  
BUDG DEPT

Attendees (First Name and Last Name) Mayor Merle S. Gorden - JOEL EDELSTEIN

Merle S. Gorden  
 Approval Signature

Attach Receipt Here

BRUEGGER'S  
 1483 Cedar Road  
 South Euclid, OH 44121  
 216-361-5576

1/14/2013 6:36:54 AM Carry  
 Order Number: **6443335**

1 Prepared Bagel New 1.39  
 1 Prepared Bagel New 1.39  
 1 Prepared Bagel New 1.39  
 1 Soda LG 1.99  
 1 Hot Coffee MD 1.99

Discount Total: 0.00  
 Sub. Total: 8.15  
 State & Local Tax: 0.00  
 Total: 8.30

Change 0.00  
 Master Card: -8.30  
 Register: 2 644335  
 Store No: 0206 Zido

Kudos, Comments, Questions?  
 Call 1-888-8BAKERY  
 www.brueggers.com

Master Card  
 Card Num : XXXXXXXXXXXX8755  
 Terminal : 000801802067  
 Approval : 09545Z  
 Batch Number: 801  
 Entry Method: S

I agree to pay the above Total Amount  
 according to Card Issuer Agreement.

Signature: Merle S. Gorden  
 Merchant Copy

Business Expense Detail Form

Date 1-14-13

Vendor Maggiano's

Amount \$ 153.60

Public Purpose of Meeting CALENDAR UPDATE & REVIEW  
RE COUNCIL AGENDAS & UPDATE  
OF CITY ISSUES

Attendees (First Name and Last Name) Mayor Merle S. Gorden - TINA TURICK -

NANCY WESIC - ROCHELLE NOCHET

Merle S. Gorden  
Approval Signature

Attach Receipt Here

MAGGIANOS-BEACHWOOD 196  
MERCHANT ID  
01/14/13 18:27:38 T052  
ANNE CHK #0086  
LITTLE CHARGE 1

MC  
XXXXXXXXXXXX8755  
GORDEN/MAYOR

AUTH # 02128Z

CHARGE AMOUNT 128.60

TIP AMOUNT 25.00

TOTAL 153.60

MAGGIANO'S  
GUEST COPY  
WELCOME YOUR COMMENTS  
PLEASE CALL US AT 1-800-983-4637  
OR VISIT US AT WWW.MAGGIANOS.COM

*Mark S. Grah*

Maggiano's  
Little Italy  
Perfect for Any Occasion  
01/14/13 17:05:00 #00196  
CHECK #0086

\*\*\*\*\*  
YOUR OPINION MATTERS

We invite you to complete our  
GUEST EXPERIENCE SURVEY

YOU COULD WIN \$1,000  
A WINNER EVERY DAY!

From browser address bar type:  
www.maggianos-survey.com

MAGGIANO'S  
Your personal code  
01EJ SUPR PXW  
LITTLE ITALY

Please enter within  
the next 4 days

No purchase necessary.  
Must be 18 or older.  
Void where prohibited.  
See website for complete rules  
and sweepstakes details.

\*\*\*\*\*

VEAL PARMESAN 25.50  
2 ICED TEA 5.90  
D. BKD. TILARIA 43.00  
SPAG. MAR. TODAY 12.95  
CHOPPED SALAD 12.50  
MAGGIANO'S SALAD 1.50  
GL 14 MERLOT 8.00  
Subtotal 119.35  
Sales Tax 9.25  
TOTAL 128.60

BY M.S.G.  
To C.O.B.

THANK YOU!!!  
We welcome your comments.

\*\*\*

www.maggianos.com  
(800) 983-4637

Personal  
ck #  
2339

MAGGIANO'S  
LITTLE ITALY



MERLE S GORDEN  
HARRIET F GORDEN  
12 KENWOOD CT  
BEACHWOOD, OH 44122-7501

6-15/410

2339

Date 1/21/13


Pay to the  
Order of

CITY OF BEACHWOOD

\$ 8<sup>00</sup>/<sub>100</sub>

EIGHT

Dollars

 Security Features  
Details on Back



**Huntington**

Private Banking

Memo

Merle S. Gordon



Business Expense Detail Form

Date 1-14-13

Vendor Nighttown

Amount \$ 51.05

Public Purpose of Meeting WEB SITE REVIEW

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Nancy Lesic

Merle S. Gorden  
Approval Signature

Attach Receipt Here

\*\*\*\*\*  
\*\*\* CHARGE VOUCHER \*\*\*  
\*\*\*\*\*

Nighttown Restaurant  
12387 Cedar Road  
Cleveland Heights, Ohio 44106

CHECK: 1669  
TABLE: 40/1  
SERVER: 46 PAPP  
DATE: JAN14'13 1:27PM  
CARD TYPE: Master Card  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 01941Z  
RESEARCH: 301418408814  
MAYOR GORDEN

SUBTOTAL: 43.05

Gratuity:

Total:

Signature:

x

\*\*\*\*\*

NATKEY

Nighttown Restaurant  
12387 Cedar Road  
(216) 795-0550

46 PAPP

40/1 CHK 1659 GST 2  
JAN14'13 12:15PM

1 FRENCH ONION	6.00
1 SOUP DJ DAY	6.00
2 WEDGE SALAD	20.00
1 TEA	2.95
2 POP	5.00
Subtotal	39.95
Tax	3.10
Amount Due	\$43.05

\*\*\*\*\*  
NIGHTTOWN JAZZ!

Ask your server for information  
on upcoming events.

\*\*\*\*\*

# Business Expense Detail Form

Date 1-15-13  
 Vendor MOXIE  
 Amount \$ 50.72

Public Purpose of Meeting CITY INVESTMENTS  
& A DESIRE TO VOL. TO HELP

Attendees ( First Name and Last Name) Mayor Merle S. Gorden - ALAN  
YANOWITZ

Merle S. Gorden  
 Approval Signature

ALAN YANOWITZ

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie  
 3355 Richmond Road  
 Cleveland, Ohio (216 ) 831-5599  
 \*\*\*\*\*

Date: Jan15'13 01:04PM  
 Card Type: Master Card  
 Acct #: XXXXXXXXXXXX8755  
 Card Entry: SWIPED  
 Trans Type: PURCHASE  
 Auth Code: 02602Z  
 Check: 1206  
 Table: 24/1  
 Server: 108 Tim T

Subtotal: 42.72

Gratuity: 8.00

Total: 50.72

Signature: Merle S. Gorden  
 \*\*\*\*\* Customer Copy \*\*\*\*\*

Attach

Moxie/Red  
 3355 Richmond Road  
 Cleveland, Ohio

108 Tim T

Tbl 24/1 Chk 1206 Gst 2  
 Jan15'13 12:04PM

1 Soup du Jour	4.00
1 Chix Entre Salad	15.75
1 Fish Spec.	14.00
1 *Soft Drink	2.95
1 Iced Tea	2.95

Subtotal	39.65
TAX	3.07
Amount Due	42.72

Business Expense Detail Form

Date 1-25-13  
Vendor BANAMA BREEZE  
Amount \$ 89.54

Public Purpose of Meeting CITIES INVOLVEMENT  
IN UPCOMING GREEN DREAM EVENT

Attendees (First Name and Last Name) Mayor Merle S. Gordon - TINA TURICK  
ROCHELLE HEUNT - DEBBIE NOBLE

Merle S. Gordon  
Approval Signature

Attach Receipt Here

**Bahama Breeze**3900 Orange Place  
Orange Village, OH 44122  
216-896-9081

Check # :39203-3034

**Bahama Breeze**3900 Orange Place  
Orange Village, OH 44122  
216-896-9081

Check # :39203-3034

**224**013  
:1524987673

Gst 4

**334 0253 9203**

\*\*\*\*\*  
Your opinion. Please \*  
about your dining \*  
by completing an \*  
survey within 7 days of \*  
t. You could win a \*  
and Prize or 1 of 100 \*  
s. Winners are drawn \*  
! \*  
te the survey and enter \*  
st, go to \*  
aBreezeSurvey.com and \*  
ID on this receipt. \*  
SE NECESSARY. Void where \*  
d. See Official Rules at \*  
aBreezeSurvey.com. \*  
\*\*\*\*\*  
(ES Feb 1, 2013)

Auth Code

02242Z

8755

Master Card

Amount 74.54

*L. S. Gaden*

15.00

89.54

**Table 224**Tatyana B  
13:39:27 01/25/2013

Gst 4

## Guest No.1

1 ICED TEA	2.49
1 ONION RINGS	2.79
1 LUNCH SALMON TOSTADA	12.49
1 COFFEE	2.49

## Guest No.2

1 NO BEV	
1 CHKN TORTILLA SOUP	4.99
1 LUNCH GR CKN COBB	10.49
1 COFFEE	2.49

## Guest No.3

1 ICED TEA	2.49
1 LUNCH SALMON TOSTADA	12.49
1 KEY LIME PIE	5.49

## Guest No.4

1 NO BEV	
1 CMBO BUTTERMILK CKN SLIDERS	7.99
HOUSE SALAD	
1 COFFEE	2.49

**ID # 3034 0253 9203**

\*\*\*\*\*  
\* We value your opinion. Please \*  
\* tell us about your dining \*  
\* experience by completing an \*  
\* online survey within 7 days of \*  
\* your visit. You could win a \*  
\* \$1,000 Grand Prize or 1 of 100 \*  
\* \$50 prizes. Winners are drawn \*  
\* monthly!!! \*  
\* \*  
\* To complete the survey and enter \*  
\* the contest, go to \*  
\* www.BahamaBreezeSurvey.com and \*  
\* enter the ID on this receipt. \*  
\* NO PURCHASE NECESSARY. Void where \*  
\* prohibited. See Official Rules at \*  
\* www.BahamaBreezeSurvey.com. \*  
\*\*\*\*\*  
(OFFER EXPIRES Feb 1, 2013)

**Duplicate Receipt  
Stored Order**

agrees to pay total in

Business Expense Detail Form

Date

2-5-13

Vendor

HAMPTON INN & SUITES

Amount

\$ 397.18

Public Purpose of Meeting

OHIO MUNICIPAL LEAGUE

CONFERENCE

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden

Approval Signature

Attach Receipt Here

See attached

# Hampton Inn & Suites Columbus-Easton Area

## Hampton

### Charge Receipt

Guest name	Merle Gorden
Guest email	On file
Property name and address	Hampton Inn & Suites Columbus-Easton Area 4150 Stelzer Road Columbus, Ohio 43230 USA
Reservation Confirmation #	80322708
Rate type	Advance Purchase
Arrival Date	Tuesday, 05 Feb 2013
Departure date	Thursday, 07 Feb 2013
Number of rooms	1

Total rate for stay	397.18 USD
Charged to credit card	*****8755

### Rules & Restrictions

#### Taxes

- 16.75 % per room per night

#### Guarantee Policy

Full prepayment is required for this reservation, your credit card will be charged immediately.

If you use a debit/credit card to check in, a hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such hold may not be released for 72 hours from the date of check-out or longer at the discretion of your card issuer.

#### Cancellation Policy

If you cancel for any reason, attempt to modify this reservation, or do not arrive on your specified check-in date, your payment is non-refundable.

At check in, the front desk will verify your check-out date. Rates quoted are based on check-in date and length of stay. Should you choose to depart early, price is subject to change.

We reserve the right to cancel or modify reservations where it appears that a customer has engaged in fraudulent or inappropriate activity or under other circumstances where it appears that the reservations contain or resulted from a mistake or error.

Totals listed here are estimated based on current taxes and exchange rates (if applicable) and do not include additional fees/charges that may be incurred during your stay.

**ADVANCE PURCHASE/NON-REFUNDABLE RATES-** Rules & Restrictions Payments for bookings at Advance Purchase/Non-Refundable rates are not refundable and bookings may not be modified. Rates are subject to availability at participating hotels. Each hotel has specific booking terms and conditions that vary and might include length of stay requirements, day of week restrictions,



deposit requirements and blackout dates. Please check with your hotel at the time of booking to determine if any additional conditions apply.

**ADVANCE PURCHASE/NON REFUNDABLE RATE** Full payment in advance required. Must purchase online at least seven (7) days prior to arrival. Your credit card will be charged immediately for entire stay. Advance Purchase Non-Refundable Rate discounts vary by hotel and commonly range from five (5) to twenty (20) percent off Best Available Rate. Policies regarding changes to Advance Purchase/Non Refundable reservations may vary. Reservations made through certain third party websites and travel agents may not be eligible for changes or refunds. No refunds for changes, cancellation or non-arrival on check-in date. Charges cannot be applied to other stays, services or merchandise. No prices or hotel availability are guaranteed until full payment is received. Even after full payment has been received, we reserve the right to cancel a reservation without notice if we become aware of or are notified of any fraud or illegal activity associated with the payment for this reservation.

**Modification of Reservation:** Price quoted applies to exact date(s)/nights/stay booked. Modifications to your reservation (including but not limited to name changes, date changes, etc.) are not permitted. However, for bookings in the United States Canada, Mexico and the Caribbean, a request to cancel an existing Advance Purchase/Non-Refundable reservation and book a new reservation may be permitted if at the time you are requesting a change to your reservation, you book a new Advance Purchase/Non Refundable reservation at any hotel in the Hilton Worldwide portfolio located in the United States, Canada, Mexico or the Caribbean, subject to availability. Upon receipt of full payment for the new reservation, Hilton will issue a refund for the cancelled reservation, less a service fee. It may take up to four (4) weeks for the refund to be reflected on your credit card. For stays originally booked at the Waldorf Astoria, Conrad, Hilton, Embassy Suites or Doubletree brand hotels, the service fee is \$50.00 and for stays originally booked at a Hilton Garden Inn, Hampton, Homewood Suites and Home2 Suites, the service fee is \$25.00. For a cancellation and rebooking to be considered, you must call our Advance Purchase Department to request a change to your reservation at (800) 236-7113 or (972) 726-3361 no less than three days prior to your scheduled check-in date.

**Early departure/cancellation:** If you depart early or you cancel or fail to honor this reservation for any reason, you will not receive any credit or refund.

**Extending your stay:** Extensions will require a new reservation for the additional date(s), subject to availability and prevailing rates, and this rate shall not apply.

**Price:** The price you selected includes room rate and applicable taxes only and does not include any applicable service charges or charges for optional incidentals (including but not limited to gratuities, food and beverage, parking, minibar charges and other optional incidentals).

**Other restrictions:** This rate is not combinable with any other offers and promotions and is not available to groups. This rate is non-commissionable. If you fail to arrive at the hotel on the scheduled arrival date, your reservation will be cancelled and you will not receive any refund or credit. Hilton HHonors® membership, earning of Points & Miles®, and redemption of points are subject to HHonors Terms and Conditions.

#### **Services provided for an additional charge**

- Parking charges: Self parking - Complimentary, Complimentary.
- In-Room Wireless Internet: Complimentary
- In-Room Wired Internet: Complimentary
- Public Wireless Internet: Complimentary

#### **Privacy Policy**

Business Expense Detail Form

Date

1-28-13

Vendor

MARriott CLEVELAND EXST

Amount

\$ 34.72

Public Purpose of Meeting

REVIEW OF DOCUMENTS RELATED  
TO CORR CUT ONTO BAYDEN RD FORM  
GOLDBERG PROPERTY.

Attendees (First Name and Last Name)

Mayor Merle S. Gorden - JEFF MOSS

Merle S. Gorden  
Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122  
CHECK: 1260  
TABLE: 44/1  
SERVER: 19 DELORIAN  
DATE: JAN28'13 8:34AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 01424Z  
MAYOR GORDEN

SUBTOTAL: 28.72

TIP: 6.00

TOTAL: 34.72

*Merle S. Cada*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
19 DELORIAN : 1  
44/1 1260 GST 2  
JAN28'13 7:33AM

1 OATMEAL 5.50  
1 SAUSAGE 4.95  
1 CHALLAH FR TOAST 10.75  
1 COFFEE 2.50  
1 SM ORANGE JUICE 2.95  
SUBTOTAL 26.65  
TAX 2.07  
PAYMENT DUE \$28.72

Gratuity: 6.00

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY

Business Expense Detail Form

Date 1-29-13  
 Vendor MOXIE  
 Amount \$ 39.89

Public Purpose of Meeting REVIEW OF VARIOUS CITY ISSUES  
INCLUDING ECONO. DEV PLAN & VARIOUS  
COMMUNITY SAFETY ISSUES.  
 Attendees (First Name and Last Name) Mayor Merle S. Gorden - ED WATERS

Merle S. Gorden  
 Approval Signature

Attach Receipt

Moxie/Red  
 3355 Richmond Road  
 Cleveland, Ohio

33 Diane S  
 ---  
 Tbl 23/1 Chk 1067 Gst 2  
 Jan29'13 12:05PM  
 ---  
 1 Chix Entre Salad 15.75  
 1 Moxie Burger 12.75  
 1 \*Soft Drink 2.95  
 ---  
 Subtotal 31.45  
 TAX 2.44  
 Amount Due 33.89

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie  
 3355 Richmond Road  
 Cleveland, Ohio (216 ) 831-5599  
 \*\*\*\*\*  
 Date: Jan29'13 12:54PM  
 Card Type: Master Card  
 Acct #: XXXXXXXXXXXX8755  
 Card Entry: SWIPED  
 Trans Type: PURCHASE  
 Auth Code: 03236Z  
 Check: 1067  
 Table: 23/1  
 Server: 33 Diane S

Subtotal: 33.89

Gratuity:

Total:

Signature:

\*\*\*\*Merchant Copy\*\*\*\*\*

\$ 39.89  
 appeared  
 on bill  
 from  
 Bank  
 card

Business Expense Detail Form

Date 1-31-13  
Vendor CEDAR CREEK GRILL  
Amount \$ 69.97

Public Purpose of Meeting VARIOUS COMMUNITY  
ISSUES INCLUDING CITY COUNCIL  
OPERATIONS

Attendees (First Name and Last Name) Mayor Merle S. Gorden - SHELLEY BERN S  
JUSTIN BERN S,

Merle S. Gorden  
Approval Signature

Attach Receipt Here

\*\*\*\*\*

\*\*\*\*\*CREDIT CARD VOUCHER\*\*\*\*\*

Cedar Creek Grille  
2101 Richmond Rd.  
Beachwood, Oh 44122  
216-342-5177

Date: Jan31'13 01:08PM  
Card Type: Mastercard  
Acct #: XXXXXXXXXXXX8755  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 05060Z  
Check: 1517  
Table: 64/1  
Server: 1013 Lauren D

Subtotal: 57.97

TIP: 12.00

TOTAL: 69.97

\* A gratuity is not included \*

PLEASE KEEP THIS COPY FOR YOUR  
PERSONAL RECORDS

CUSTOMER COPY

*Mark S. Gosh*

CEDAR CREEK GRILLE

2101 Richmond Rd.  
Beachwood, Ohio 44122  
216-342-5177

1013 Lauren D

Tbl 64/1 Chk 1517 Gst 3  
Jan31'13 12:18PM

2 CrabC Salad	30.00
1 CCG Burger	12.00
1 Ice Tea	2.95
2 Soft Drink	5.90
1 Coffee	2.95

Subtotal	53.80
Tax	4.17

01:15PM Total 57.97

Thank You For Dining with Us!

Business Expense Detail Form

Date

1-31-13

Vendor

MARRIOTT CLEVELAND EAST

Amount

\$ 38.22

Public Purpose of Meeting

POTENTIAL OPPORTUNITIES

FOR THE HEBREW FREE LOAN ORGAN. HOW  
THE MIGHT BE OF FURTHER ASST. TO OUR RESIDENTS

Attendees (First Name and Last Name)

Mayor Merle S. Gordon

STUART SHARPE

Merle S. Gordon

Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122  
CHECK: 1451  
TABLE: 44/1  
SERVER: 109 KATHY  
DATE: JAN31'13 8:41AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 00208Z  
MAYOR GORDEN

SUBTOTAL: 32.22

TIP: 6.00

TOTAL: 38.22

*Mike S. Gade*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
109 KATHY  
44/1 1451 GST 2  
JAN31'13 8:31AM  
2 ALL-AMER BUFFET 29.90  
SUBTOTAL 29.90  
TAX 2.32  
PAYMENT DUE \$32.22

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY



Business Expense Detail Form

Date 2-2-13

Vendor The City Club

Amount \$ 65.00

Public Purpose of Meeting Ed Fitzgerald's State of the  
County on 2-19-13

Attendees (First Name and Last Name) Mayor Merle S. Gorden

Merle S. Gorden  
Approval Signature

Attach Receipt Here

See attached



The City Club of Cleveland  
850 Euclid Ave., 2<sup>nd</sup> Floor  
Cleveland, OH 44114  
(216) 621-0082  
(216) 621-0129 FAX

## Sales Receipt

Merle Gorden  
City of Beachwood  
25325 Fairmount Blvd  
Beachwood, OH 44122

Date	Sale No.	Check #	Payment Method
02.02.13			Cr Card

QTY	DESCRIPTION	RATE	AMOUNT
1	Tickets for Ed FitzGerald's State of the County on Feb. 19, 2013 at the Renaissance Cleveland Hotel at 11:30 a.m.		
		<b>TOTAL</b>	65

*Gorden, M.*  
~THE CITY CLUB OF CLEVE  
850 EUCLID AVE  
CLEVELAND, OH 441143306

TERMINAL ID: 007029333  
MERCHANT #: 345396292889

MC  
#XXXXXXXXXXXX8755

SALE  
BATCH: 000489 INVOICE: 0097170100  
DATE: FEB 02, 13 TIME: 17:59  
SQ: 027 AUTH NO: 004102

**TOTAL \$65.00**

CUSTOMER COPY

This is not an invoice. No payment is due.  
Thank you for your business!

[Home](#) [Programs](#) [100th Anniversary](#) [New Leaders](#) [About Us](#) [Outreach](#) [Membership & Support](#) [Catering](#) [Media](#) [Contact Us](#)

## City Club Reservations

## Please Review Your Reservation Below

You MUST click the REGISTER button below in order to complete your registration.  
If you do not click this button, you will NOT be registered for the event.

Registration For Speaker: The Honorable Ed FitzGerald at 2/19/2013 12:00:00 PM  
Total: \$65.00

Name: Merle Gorden  
Address: 25325 Fairmount Blvd.  
Suite:  
City: Beachwood  
State: OH  
Zip Code: 44122  
Phone: 216-292-1901  
Fax:  
Organization: City of Beachwood  
Credit Card Type: MASTER CARD  
Credit Card Number: XXXXXXXXXX  
Credit Card Expiration: 01/14  
CVV: 693  
Billing Name: Mayor Merle S. Gorden  
Billing Address: PO Box 22659  
Billing Suite:  
Billing City: Beachwood  
Billing State: OH  
Billing Zip Code: 44122

[Confirm Registration](#)[Cancel](#)

## UPCOMING EVENTS

Jim Patro

Linda Darling - Hammond, Charles E. Ducommun Professor of Education

The Honorable Ed FitzGerald

Goodwin Liu, Associate Justice

Franz Welser-Möst, Music Director

Charles Murray, W.H. Brady Scholar

## MEDIA

Podcast   
Live Webcast  
Video Archive  
On the Air

## SUPPORT

There are several ways to support the work of The City Club and maintain the values of free speech.

## MEMBERSHIP

The City Club belongs to its members. The members set the tone and facilitate the discussion.  
**SIGN UP NOW**

## SPONSORS

CHASE

CITICORP

Business Expense Detail Form

Date

2-2-13

Vendor

JACKS DELI

Amount

\$ 15.31

Public Purpose of Meeting

REVIEW OF BUILDING

PERMIT FEES.

Attendees (First Name and Last Name)

Mayor Merle S. Gorden

DR. HABER

Approval Signature

Merle S. Gorden

Attach Receipt Here

JACK'S DELI

Date: 2/2/2013 Time: 9:17:59 AM

Status: Approved

Card Type: Master Card  
Card Number: XXXXXXXXXXXX8755  
Expiration Date:  
Swipe/Manual: Swipe

Server ID: 171  
Server Name: Lisa  
Check Number: 977696

Check Name:

Tab Number: 50  
Profit Center ID: 3  
Profit Center: Table Sales  
Number Of Covers: 2  
Persons: 1  
Card Number: XXXXXXXXXXXX8755  
Card Owner: GORDEN/MAYOR

AMOUNT 11.31

TIP 4.00  
TOTAL 15.31

Approval: 04604Z

I AGREE TO COMPLY WITH  
THE CARDHOLDER AGREEMENT

*Neste S. Gade*

Customer Signature  
CUSTOMER COPY

JACK'S DELI  
Table Sales  
Person 1

Table: 50

Server: 171

Check: 977696

Covers: 2

Time: 9:04:40 AM

Date: 2/2/2013

1	TWO EGGS	6.49
1	TOAST BAGEL ROLL	1.75

Food Sub-Total 8.24

1	COFFEE	2.25
---	--------	------

Beverage Sub-Total 2.25

Sub Total 10.49

Sales Tax 0.82

TOTAL 11.31

Thank You,

Deana

Thank You For Dining With Us!



**Business Expense Detail Form**

Date 2-4-13  
 Vendor MOXIE  
 Amount \$ 38.81

Public Purpose of Meeting REVIEW OF CITY MEDICAL PLAN

Attendees ( First Name and Last Name) Mayor Merle S. Gorden - RON RAFFEL

Merle S. Gorden  
 Approval Signature

\*\*\* CREDIT CARD VOUCHER \*\*\*  
 Moxie  
 3355 Richmond Road  
 Cleveland, Ohio (216 ) 831-5599  
 \*\*\*\*\*  
 Date: Feb04'13 12:58PM  
 Card Type: Master Card  
 Acct #: XXXXXXXXXXXX8755  
 Card Entry: SWIPED  
 Trans Type: PURCHASE  
 Auth Code: 05171Z  
 Check: 1765  
 Table: 23/1  
 Server: 108 Tim T

Subtotal: 32.81  
 Gratuity: 6.00  
 Total: 38.81

Attach Receipt	
Moxie/Red 3355 Richmond Road Cleveland, Ohio	
108 Tim T	
Tbl 23/1	Chk 1765      Gst 2
	Feb04'13 11:57AM
1 Wedge/Beef	14.75
1 Chix Sand	12.75
1 *Soft Drink	2.95
Subtotal	30.45
TAX	2.36
Amount Due	32.81

Signature: Merle S. Gorden  
 \*\*\*\*\* Customer Copy \*\*\*\*\*  
RON RAFFEL

Business Expense Detail Form

Date 2-4-13

Vendor Jack's Deli

Amount \$ 120.40

Public Purpose of Meeting Council Dinner prior to  
meetings

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Merle S. Gorden  
Approval Signature

Attach Receipt Here

See attached

JACK'S DELI

Date: 2/4/2013 Time: 3:38:57 PM

Status: Approved

Card Type: Master Card

Card Number: XXXXXXXXXXXX8755

Expiration Date:

Swipe/Manual: Manual

Server ID: 141

Server Name: Lisa

Check Number: 978434

Check Name:

Tab Number: 2013

Profit Center ID: 3

Profit Center: Table Sales

Number Of Covers: 1

Persons: 1

Card Number: XXXXXXXXXXXX8755

Card Owner: Manual Ent

AMOUNT 110.40

TIP 10.00

TOTAL 120.40

Approval: 07092Z

I AGREE TO COMPLY WITH  
THE CARDHOLDER AGREEMENT

*Maria S. Cardo / DN*

Customer Signature  
CUSTOMER COPY



# CITY OF *Beachwood*

25325 FAIRMOUNT BLVD • BEACHWOOD • OHIO 44122 • (216) 292-1901 • FAX (292) 292-1984

MAYOR  
MERLE S. GORDEN

## **Fax – for delivery by 4:00 p.m. on Monday, February 4, 2013**

To: Jack's Deli  
Fax: 216-691-6837 / 1 page  
Date: February 4, 2013  
From: City of Beachwood (Debbie/ Mayor's Office)  
MasterCard [REDACTED] exp. 01/14 code 693  
Please bring receipt.

4 Extra Lean Corned Beef Sandwiches / condiments on side

3 Turkey off Bone Sandwiches on Wheat / condiments on side

*Please wrap all above sandwiches in halves.*

1 Turkey off Bone Sandwich on White Challah, No Seeds, No Lettuce,  
No Tomato (Mayo on side)

NO Sliced Tomatoes Needed.  
Pickles for 5 only.

2 Pints Potato Salad  
2 Pints Cole Slaw  
2 Quarts of Pea Soup w/ 8 paper bowls

Business Expense Detail Form

Date

2-5-13

Vendor

MARRIOTT CLEVELAND EAST

Amount

\$ 31.56

Public Purpose of Meeting

REVIEW OF REGIONAL ISSUES  
& DISCUSSION BET BEACHWOOD & SWAKER HTS.

Attendees (First Name and Last Name)

Mayor Merle S. Gordon - ROB ZIMMERMAN

Merle S. Gordon  
Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122

CHECK: 1662  
TABLE: 45/1  
SERVER: 109 KATHY  
DATE: FEB05'13 8:27AM  
CARD TYPE: N/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 01067Z  
MAYOR GORDEN

SUBTOTAL: 26.56  
TIP: 5.00  
TOTAL: 31.56  
Mile Gorden  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

Rob Zimmerman

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
109 KATHY

45/1 1662 GST 2  
FEB05'13 7:50AM

1 TWO EGGS W/TOAST	6.25
1 SAUSAGE	4.95
1 OATMEAL	5.50
2 COFFEE	5.00
1 SM ORANGE JUICE	2.95
SUBTOTAL	24.65
TAX	1.91
PAYMENT DUE	\$26.56

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY

JAN 2013

Business Expense Detail Form

Date 12-10-12

Vendor Marriott

Amount \$ 30.75

Public Purpose of Meeting POSS OF BEING  
EMPLOYED IN CITY OF BENCAWOOD

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Don Williams

Merle S. Gorden  
Approval Signature

Attach Receipt Here

--

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OH.  
CHECK: .850  
TABLE: 45/1  
SERVER: 133 WESLON  
DATE: DEC10'12 8:45  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 04230Z  
MAYOR GORDEN

SUBTOTAL: 25.75

TIP: 5.00

TOTAL: 30.75

*Mark S. Gordon*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARENSVILLE HTS, OHIO 44122  
333 ANGELA

45/1 ~~1856~~ ~~1987~~ GST 2  
DEC12'12 7:36AM  
12/10  
2 ALL AMERICAN 23.90  
SUBTOTAL 23.90  
TAX 1.85  
PAYMENT DUE \$25.75

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY

*Missed Pages  
ORIGINAL*

Business Expense Detail Form

Date 12-12-12

Vendor Marriott

Amount \$ 30.75

Public Purpose of Meeting REVIEW OF Pg 2  
AGENDA

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Bryan Zabell

Merle S. Gorden  
Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
ANGELA

45/1 1987 GST 2  
DEC 12 '12 7:36AM

2 ALL AMERICAN 23.90  
SUBTOTAL 25.90  
TAX 1.85  
PAYMENT DUE \$25.75

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122

CHECK: 1987  
TABLE: 45/1  
SERVER: 333 ANGELA  
DATE: DEC 12 '12 8:41AM  
CARD TYPE: M/C  
ACCT #: YXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 05240Z  
MAYOR GORDEN

SUBTOTAL: 25.75

TIP: 5.00

TOTAL: 30.75

*Mike S. Gude*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

Business Expense Detail Form

Date 12-14-12

Vendor VERIZON

Amount \$ 32.31

Public Purpose of Meeting PURCHASE CELL  
PHONE BATTERY

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Merle S. Gorden  
Approval Signature

Attach Receipt Here



\*\*\*\*\*  
EQUIPMENT RECEIPT  
\*\*\*\*\*

VERIZON WIRELESS  
27460 Chagrin Blvd  
Beachwood, OH 44122-4423  
(216)765-1444  
verizonwireless.com

Order Location: M5943 01 #327883  
Receive Location: M5943 01  
Receipt Date/Time: 12/14/2012 10:25 ET  
Register: 10 granje3 - E1919  
Pmt 1 of 1

	Retail Price	Your Price
BAT:RIM STOR	\$39.99	\$29.99
RIMSTORMBAT		

OH Local Sales Tax:	\$ .67
OH State Sales Tax:	\$1.65
Total Taxes/Fees:	\$2.32
Total:	\$32.31

Total Savings: \$10.00

This Payment: \$32.31

Payment Method: MAST XXXXXXXXXXXXX87

*Mike S. Cash*

Signature: \_\_\_\_\_

Return Policy

New and Certified Pre-Owned merchandise items may only be returned or exchanged within 32 days (01/15/2013). You are permitted to make one exchange.

See [vzw.com/returnpolicy](http://vzw.com/returnpolicy) for complete details.

Purchases made between November 22 and December 25, 2012 may be returned or exchanged through January 15, 2013. All other provisions of Verizon Wireless' Return & Exchange Policy continue to apply, including the restock fee.

Thank You!



OHISM594301000327883

Business Expense Detail Form

Date

12-17-12

Vendor

Abuelo's

Amount

\$ 50.83

Public Purpose of Meeting

ECONOMIC DEV. SITUATIONS

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden - GARY NASLER

Merle S. Gorden  
Approval Signature

Attach Receipt Here

ENTER TO WIN! DETAILS BELOW!

Abuelo's - Store 630

26100 Harvard Rd.

Warrensville Hgt, OH 44122

Server: Nora

DOB: 12/17/2012

02:38 PM

12/17/2012

Table 104/1

3/30015

SALE

K/C

7340040

Card #XXXXXXXXXXXX8755

Magnetic card present: GORDEN MAYOR

Card Entry Method: S

Approval: 042117

Amount: \$ 42.83

+ Tip:

8.00

= Total:

50.83

I agree to pay the above  
total amount according to the  
card issuer agreement.

*Mike S. Coder*

Tell us about our service!

Answer our Guest Survey at

[www.abuelos.com](http://www.abuelos.com) or

by calling 1-877-280-5015

Check the above website  
for contest details

*Mike S. Coder*

Thank You!

ENTER TO WIN! DETAILS BELOW!

Abuelo's - Store 630

26100 Harvard Rd.

Warrensville Hgt, OH 44122

Server: Nora

12/17/2012

Table 104/1

2:27 PM

Guests: 2

30015

Reprint #: 1

Iced Tea (2 @2.69)

5.38

Fajitas for 2

28.99

Coffee (2 @2.69)

5.38

Subtotal

39.75

Tax

3.08

Total

42.83

Balance Due

42.83

Tell us about our service!

Answer our Guest Survey at

[www.abuelos.com](http://www.abuelos.com) or

by calling 1-877-280-5015

Check the above website

for contest details

Business Expense Detail Form

Date 12-17-12

Vendor Marriott

Amount \$ 20.97

Public Purpose of Meeting REV. OF TRAFFIC  
CONTROL AROUND BAYWOOD DEY.

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Paul Siegal

Merle S. Gorden  
Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122  
CHECK: 1305  
TABLE: 44/1  
SERVER: 133 WESTON  
DATE: DEC17'12 8:33AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 01189Z  
MAYOR GORDEN

SUBTOTAL: 16.97  
TIP: 4.00  
TOTAL: 20.97  
*Mark S. Gaden*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT

\*KEEP ONE COPY FOR YOUR RECORDS\*

*Mark S. Gaden*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
133 WESTON

44/1 1305 GST 2  
DEC17'12 7:53AM

1 TWO EGGS W/TOAST	6.25
1 TOAST	4.50
2 COFFEE	5.00
SUBTOTAL	15.75
TAX	1.22
PAYMENT DUE	\$16.97

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY.

Business Expense Detail Form

Date 12-18-12

Vendor Original Pancake House

Amount \$ 32.77

Public Purpose of Meeting REVIEW OF BUSINESS  
OPERATIONS & FUTURE EXPANSION

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Don Sykes

Mark S. Gub  
Approval Signature

Attach Receipt Here

The Original Pancake House  
28700 Chagrin Blvd  
Woodmere, Ohio 44122  
( 216 ) 292-7777

Date: Dec18'12 08:21AM  
Card Type: MC  
Acct #: XXXXXXXXXXXX8755  
Trans Key: EIE007071570244  
Exp Date: XX/XX  
Auth Code: 04032Z  
Check: 6847  
Table: 16/1  
Server: 1046 Cheryl

Subtotal: 27.77  
TIP: 5.00  
TOTAL: 32.77

SIGNATURE

I AGREE TO PAY THE ABOVE TOTAL  
ACCORDING TO MY CARD ISSUER  
AGREEMENT.

\*\*\* CUSTOMER COPY \*\*\*

*Mark S. Guder*

The Original Pancake House  
28700 Chagrin Blvd  
Woodmere, Ohio 44122  
( 216 ) 292-7777

1046 Cheryl

Tbl 16/1 Chk 6847 Gst 2  
Dec18'12 07:30AM

3 Coffee @ 2.39	7.17
1 Reg OJ	2.69
1 Buttermilk	6.09
1 Crepes	6.19
1 Oatmeal	3.69

Subtotal	25.83
Tax	1.94
07:31AM Total	27.77

Please Pay Cashier  
Thank You!!

*Thank*

Business Expense Detail Form

Date

12-20-12

Vendor

CEDAR CREEK GRILL

Amount

\$ 44.17

Public Purpose of Meeting

LOOKING FOR ADD. BUSINESS  
FROM BWA. PRINTING MATERIALS.

Attendees (First Name and Last Name)

Mayor Merle S. Gorden - KEN LANDIS

W.B.E WOMANS BUSINESS ~~OWNERSHIP~~ OWNERSHIP.

Approval Signature

Merle S. Gorden

Attach Receipt Here



\*\*\*\*\*

\*\*\*\*\*CREDIT CARD VOUCHER\*\*\*\*\*

Cedar Creek Grille  
2101 Richmond Rd.  
Beachwood, Oh 44122  
216-342-5177

Date: Dec20'12 01:24PM  
Card Type: Mastercard  
Acct #: XXXXXXXXXXXX8755  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 05370Z  
Check: 1116  
Table: 92/1  
Server: 1008 Christin

Subtotal: 37.17

TIP: 7.00

TOTAL: 44.17

\* A gratuity is not included \*

PLEASE KEEP THIS COPY FOR YOUR  
PERSONAL RECORDS

*Mull S. Gade*  
CUSTOMER COPY

*KEN HARRIS*

CEDAR CREEK GRILLE

2101 Richmond Rd.  
Beachwood, Ohio 44122  
216-342-5177

1008 Christin

Tbl 92/1 Chk 1116 Gst 2  
Dec20'12 12:09PM

1 Cedar Salmon	14.00
1 Rstd Chicken	13.00
1 Ice Tea	2.50
1 Coffee	2.50
1 Hot Tea	2.50

Subtotal	34.50
Tax	2.67
01:25PM Total	37.17

Thank You For Dining with Us!

Business Expense Detail Form

Date 12-21-12

Vendor Maggiand's

Amount \$ 105.42

Public Purpose of Meeting ECONOMIC DEV.

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Tina Turick Tina Trill

Merle S. Gorden  
Approval Signature

Attach Receipt Here

# MAGGIANO'S

== LITTLE ITALY ==

## Maggiano's

Little Italy

Perfect for Any Occasion

#071 ROBERTAT012

12/21/12 12:46:00 #00196

CHECK #0055

\*\*\*\*\*  
YOUR OPINION MATTERS

We invite you to complete our  
GUEST EXPERIENCE SURVEY

== LITTLE ITALY ==  
YOU COULD WIN \$1,000  
A WINNER EVERY DAY!

From browser address bar type:  
[www.maggianos-survey.com](http://www.maggianos-survey.com)

Your personal code:  
058L XU7J 62YT

Please enter within  
the next 4 days

No purchase necessary.

Must be 18 or older.

Void where prohibited.

See website for complete rules  
and sweepstakes details.

\*\*\*\*\*

SIDE ANGEL HAIR	4.25
LEMON COOKIE TIN	9.95
ADD SALMON	5.00
2 COFFEE	5.90
MAGGIANO'S SALA	11.50
L CKN-PICCATA	14.50
3 ICED TEA	8.85
CKN APPLE SALAD	12.95
PEPPERONI-FLTB RD	8.95

Subtotal 81.85

Sales Tax 5.57

TOTAL 87.42

ITEISHA JEF

THANK YOU!!!

We welcome your comments.

\*\*\*

[www.maggianos.com](http://www.maggianos.com)  
(800) 983-4637

== LITTLE ITALY ==

MAGGIANOS-BEACHWOOD 196

MERCHANT ID

12/21/12 13:50:07 T012

ROBERTA

CHK #055

CHARGE 1

# MAGGIANO'S

XXXXXXXXXXXX8755

GORDEN/MAYOR

== LITTLE ITALY ==

AUTH # 00159Z

CHARGE AMOUNT 87.42

TIP AMOUNT 18.00

TOTAL 105.42

GUEST COPY

WE WELCOME YOUR COMMENTS!

PLEASE CALL US AT 1-800-983-4637

OR VISIT US AT [WWW.MAGGIANOS.COM](http://WWW.MAGGIANOS.COM)

# MAGGIANO'S

== LITTLE ITALY ==

Business Expense Detail Form

Date

12-26-12

Vendor

Jack's Deli

Amount

\$ 15.95

Public Purpose of Meeting

POSS ECONOMIC DEV.

OPPORTUNITIES

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden

Dick Medvick

Art Anton

Merle S. Gorden

Approval Signature

Attach Receipt Here

Arthur F. Anton  
President and Chief Executive Officer

Swagelok

Swagelok Company  
29500 Solon Road  
Solon, Ohio 44139-3492 U.S.A.

440.248.4600  
440.519.7378 fax  
art.anton@swagelok.com  
www.swagelok.com

JACK'S DELI

Date: 12/26/2012 Time: 8:29:41 AM

Status: Approved

Card Type: Master Card  
Card Number: XXXXXXXXXXXX8755  
Expiration Date:  
Swipe/Manual: Swipe

Server ID: 12  
Server Name: Lisa  
Check Number: 965829

Check Name:

Tab Number: 50  
Profit Center ID: 3  
Profit Center: Table Sales  
Number Of Covers: 1  
Persons: 1

Card Number: XXXXXXXXXXXX8755  
Card Owner: GORDEN/MAYOR

AMOUNT 59.95

TIP 16.-  
TOTAL 75.95

Approval: 08463Z

I AGREE TO COMPLY WITH  
THE CARDHOLDER AGREEMENT

*Mark S. Gordon*

Customer Signature  
CUSTOMER COPY

JACK'S DELI  
Table Sales  
Person 1

Table: 50  
Check: 965829  
Time: 8:29:36 AM

Server: 12  
Covers: 1  
Date: 12/26/2012

1	POPEYE OMELETTE	7.95
	BROCCOLI	0.50
1	EGGS & SALAMI	7.99
1	NOVA SCOTIA SALMON APP	14.95
1	SIDE CREAM CHEESE	0.25
2	OPEN DELI	18.90

Food Sub-Total 50.54

2	COFFEE	4.50
1	FRUIT JUICE	1.95

Beverage Sub-Total 6.45

Sub Total 56.99  
Sales Tax 2.96

**TOTAL 59.95**

Thank You,  
Irena

Thank You For Dining With Us!

Business Expense Detail Form

Date 12-31-12

Vendor Marbella

Amount \$ 41.50

Public Purpose of Meeting REVIEW OF HAMPTONS  
OPERATIONS.

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Sammy Kay

Merle S. Gorden  
Approval Signature

Attach Receipt Here

**MARBELLA**  
29425 CHAGRIN BLVD  
PEPPER PIKE OH 44122

Terminal #: 00000001  
DEC 31, 12 1:14 PM

Server ID: 4

MASTERCARD  
\*\*\*\*\*8755

SALE  
BATCH #: 729  
RRN: 236632007906

REF#: 001  
AUTH #: 023192

AMOUNT \$34.50  
TIP \$ 7.00  
TOTAL \$ 41.50

18%=\$6.21 20%=\$6.90

APPROVED

216-464-9939

CUSTOMER COPY

CHECK NO.	DATE	NO. PERSONS	TABLE NO.
629936		2	24
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			

18  
 7  
 7  
 32  
 2.50  
 Tax  
 \$34.50  
 Mark Gader

CHECK NO.	DATE	NO. PERSONS	AMOUNT OF CHECK
629936			



Business Expense Detail Form

Date 1-3-13

Vendor Tomasdo Tomahdo

Amount \$ 76.36

Public Purpose of Meeting Alex won lunch w/ Mayor as  
donated to 2nd School's Orchestra Fundraiser

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Alex Constantier, parents + visiting grandparents

Merle S. Gorden  
Approval Signature

Attach Receipt Here

\*\*\*\*\* Revised \*\*\*\*\*

# Tomaydo Tomahhdo Beachwood

3429 W Brainard  
Beachwood, OH 44122  
Phone: 216-591-9191  
Fax: 216-591-9192  
www.tomaydo.com

## Tomaydo Tomahhdo Beachwood

3429 W Brainard  
Beachwood, OH 44122  
216-591-9191  
Fax: 216-591-9192  
www.tomaydo.com

Ord #2

## Delivery

January 03, 2013 10:23 AM

Cashier: Carolyn K.  
Order #: 2  
Transaction ID: 666  
Approval Code: 02217Z

Empl: Carolyn K. 01/03/2013 10:23 AM

CITY OF BEACHWOOD  
DEBBIE NOBLE  
25325 FAIRMOUNT BLVD  
#MAIN  
Zip: 44122  
216-292-1901

MC 8755 Payment 66.36

Tip 10.00

Total 76.36

\*\*\* Guest Copy \*\*\*

\*\*\*\*\*

## ORDER NOTE

11:45

\*\*\*\*\*

1 Tom Tom Cobb	9.49
Balsamic Vin	
NO Cheddar	
2X Chicken	
2 Side of Bread	1.90
1 Medium Cheese	11.99
Regular	
Pepperoni	
1 COMBO Sonoma Salad	4.24
Ranch	
1 COMBO 1/2 FB Cheese	5.74
Italian Sausage	
Mushrooms	
3 Chicken Caesar	26.97
Caesar Drs	
NO Chicken	

Subtotal	60.33
Tax	0.00
Delivery Fee	6.03
Total	66.36

MC 8755 Payment 66.36

Tip \_\_\_\_\_

Total \_\_\_\_\_

\*\*\* Guest Copy \*\*\*

Business Expense Detail Form

Date 1-2-13

Vendor Hilton

Amount \$ 37.74

Public Purpose of Meeting REVIEW OF SEVERAL

CITY ISSUES - ONE BEING NEXT

LOCATION FOR F.D. #2

Attendees (First Name and Last Name) Mayor Merle S. Gorden

Dale Pekarek + Pat Kearns

Merle S. Gorden  
Approval Signature

Attach Receipt Here

missing

1/21/13  
FYI - CANNOT  
LOCATE.  
BREAKFAST-

Merle  
S. Gorden

forward

Hilton  
Cleveland East  
3663 Park East Drive  
Beachwood, OH 44122  
(216)464-5950

=== REPRINT ===

LENNETTE F 377816  
Wed 01/02/13 9:27 AM Table 3  
Guest Num: 1 Guests 3  
RESTAURANT

1 BREAKFAST MEAT 5.25  
1 HASHBROWNS 3.25  
1 \*FRENCH TOAST 8.75  
1 OATMEAL 3.95  
1 WITH FRUIT 1.50  
3 \*COFFEE OR TEA 6.75

SubTotal 29.45  
Tax 1 2.29

Total 31.74

=== REPRINT ===

MASTERCARD Amount Applied 31.74

MASTERCARD Tendered 31.74

FOR ROOM CHARGES ONLY!

Gratuity \_\_\_\_\_

Total Charge \_\_\_\_\_

Room Number \_\_\_\_\_

Print Name \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Hilton  
Cleveland East  
3663 Park East Drive  
Beachwood, OH 44122  
(216)464-5950

EMP: LENNETTE F  
Date 01/02/13  
Table 3  
377816

MASTERCARD  
Time 08:21  
RESTAURANT

Card Holder GORDEN, MAYOR  
Card Number #####8755  
Auth-Code.. 04630Z  
Ctrl: 30911

Amount.. 31.74

Tip.... 6.00

Total... 37.74

X Mark S. Gade  
Cardmember agrees to pay total in  
accordance with agreement governing  
use of such card.

\*\*\* Merchant Copy \*\*\*

Business Expense Detail Form

Date 1-3-13

Vendor Staples

Amount \$ 33.94

~~Public Purpose of Meeting~~ Office Supplies

~~Attendees (First Name and Last Name)~~ Mayor Merle S. Gorden

Merle S. Gorden  
Approval Signature

Attach Receipt Here

**STAPLES**

that was easy.

Low prices. Every item. Every day.

5950 Mayfield Rd.

Mayfield Heights, OH 44124

(440) 684-0302

SALE 1416728 5 005 74850  
0669 01/03/13 08:57  
QTY SKU PRICE

1	POST-IT 4X8 SS WIT	
	051141234267	5.49N
1	ARC TO DO REFILL P	
	718103140010	3.99N
1	ARC NR REFILL PAPE	
	718103139991	2.99N
1	POST-IT 4X6 SS LND	
	051135807958	13.49N
1	ARC POLY ZIP POCKE	
	718103156127	3.99N
1	ARC POLY TAB DVDR	
	718103156097	3.99N
	SUBTOTAL	33.94

Tax Exempt Number 4229377223

TOTAL \$33.94

MasterCard 33.94  
Card No.: XXXXXXXXXXXX8755 [S]  
Auth No.: 09308Z

**TOTAL ITEMS 6**

Compare and Save  
with Staples-brand products.

THANK YOU FOR SHOPPING AT STAPLES !

Shop online at [www.staples.com](http://www.staples.com)

Shopping at Staples just got even easier.  
Save time when you reserve items  
online and pick up in store.  
Get details and try it out at [staples.com](http://staples.com)



06690103137485005

Business Expense Detail Form

Date 1-5-13

Vendor STAPLES

Amount \$ 7.98

Public Purpose of Meeting OFFICE SUPPLIES

Attendees ( First Name and Last Name) Mayor Merle S. Gorden -

Merle S. Gorden  
Approval Signature

Attach Receipt Here

**STAPLES**

that was easy.

Low prices. Every item. Every day.

5950 Mayfield Rd.

Mayfield Heights, OH 44124

(440) 684-0302

SALE	1528894 1 001 57908
	0669 01/05/13 09:27
QTY SKU	PRICE

REWARDS NUMBER 2111277741

1	ARC TO DO REFILL P	
	718103140010	3.99N
1	ARC POLY TAB DVDR	
	718103156097	3.99N
SUBTOTAL		7.98

Tax Exempt Number 2111277741

TOTAL	\$7.98
-------	--------

MasterCard	7.98
Card No.: XXXXXXXXXXXX8755 [S]	
Auth No.: 01584Z	

**TOTAL ITEMS 2**

Compare and Save  
with Staples-brand products.

THANK YOU FOR SHOPPING AT STAPLES !

Shop online at [www.staples.com](http://www.staples.com)

Shopping at Staples just got even easier.  
Save time when you reserve items  
online and pick up in store.  
Get details and try it out at [staples.com](http://staples.com)



0 6 6 9 0 1 0 5 1 3 5 7 9 0 8 0 1



Business Expense Detail Form

Date 1-5-13

Vendor Corky + Lenny

Amount \$ 32.92

Public Purpose of Meeting REVIEW OF VOL.

HELP MAY BE USED & NEEDED  
FOR BWA'S 100 YR. BD CELEBRATION

Attendees (First Name and Last Name)

Mayor Merle S. Gordon - NOWARD

CODEN - LEON LOWRE

Merle S. Gordon  
Approval Signature

Attach Receipt Here

forward

CORKY & LENNY'S  
(216)464-3838

Date: 1/5/2013 Time: 9:04:34 AM  
Status: Approved  
Card Type: Master Card  
Card Number: XXXXXXXXXXXX8755  
Swipe/Manual: Swipe  
Server ID: 4912  
Server Name: Esther  
Check Number: 511186

Check Name:

Tab Number: 35  
Profit Center ID: 3  
Profit Center: Table Sales  
Number Of Covers: 1  
Persons: 1  
Card Number: XXXXXXXXXXXX8755  
Card Owner: GORDEN/MAYOR

AMOUNT 32.92

REL-  
HEAT  
CASH  
\$6.00

TIP           

TOTAL 32.92

Approval: 03731Z  
I AGREE TO COMPLY WITH  
THE CARDHOLDER AGREEMENT

*Mark S. Guder*

Customer Signature  
CUSTOMER COPY

CORKY & LENNY'S  
27091 CHAGRIN BLVD  
(216)464-3838

Table Sales

Person 1

Table: 35

Server: 4912

Check: 511186

Covers: 1

Time: 9:05:29 AM

Date: 1/5/2013

1	LOX NOVA	10.95
2	2 EGGS	8.50
1	ONE SLICE NOVA	3.75
1	2 PIECES TURKEY SAUSAGE	1.50
3	COFFEE	5.85

Sub Total	30.55
Sales Tax	<u>2.37</u>

TOTAL 32.92

Thank You,  
Wendy



"HAPPY HOLIDAYS"  
Gift Certificates Available  
Buy a \$100 Gift Card Get a \$10 Gift Card Free  
Ask the Cashier!

Business Expense Detail Form

Date 1-8-13

Vendor Cedar Creek Grille

Amount \$ 72.34

Public Purpose of Meeting Economic Development  
& Web Site

Attendees ( First Name and Last Name) ~~Mayor Merle S. Gorden~~

Tina Turick, Debbie Noble, Sally Deitrick

Merle S. Gorden  
Approval Signature

Attach Receipt Here

\*\*\*\*\*

\*\*\*\*\*CREDIT CARD VOUCHER\*\*\*\*\*

Cedar Creek Grille  
2101 Richmond Rd.  
Beachwood, Oh 44122  
216-342-5177

Date: Jan08'13 12:54PM  
Card Type: Mastercard  
Acct #: XXXXXXXXXXXX8755  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 03568Z  
Check: 1818  
Table: 55/1  
Server: 1036 Oj s

Subtotal: 60.34

TIP: 12.00

TOTAL: 72.34

\* A gratuity is not included \*

PLEASE KEEP THIS COPY FOR YOUR  
PERSONAL RECORDS

CUSTOMER COPY

CEDAR CREEK GRILLE

2101 Richmond Rd.  
Beachwood, Ohio 44122  
216-342-5177

1036 Oj s

Tbl 55/1 Chk 1818 Gst 3  
Jan08'13 12:07PM

1 Mushroom Soup	6.00
1 Lob Bisque	7.00
1 Arugula Salad	6.00
1 Salmon Burger	11.00
1 Steak Frites	16.00
1 Grld Fish	14.00

Subtotal	60.00
Open \$	4.00-
Tax	4.34
12:48PM Total	60.34

Thank You For Dining with Us!

Business Expense Detail Form

Date 1-8-13

Vendor Marietta

Amount \$ 21.78

Public Purpose of Meeting GENERAL REV. & UP DATE  
RE CHEVE ISSUES

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Ms. Merle Gordon

Merle S. Gorden  
Approval Signature

Attach Receipt Here

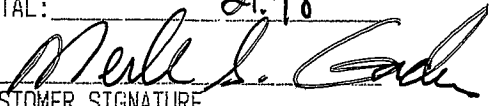
*forward*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122  
CHECK: 1064  
TABLE: 44/1  
SERVER: 109 KATHY  
DATE: JAN08'13 8:24AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 06671Z  
MAYOR GORDEN

SUBTOTAL: 17.78

TIP: 4.00

TOTAL: 21.78

  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARENSVILLE HTS, OHIO 44122  
109 KATHY  
-----  
44/1 1064 GST 2  
JAN08'13 7:59AM  
-----

2 OATMEAL W/FRUIT 11.50  
2 COFFEE 5.00  
SUBTOTAL 16.50  
TAX 1.28  
PAYMENT DUE \$17.78

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY



Attn: Accounts Payable  
P.O. Box 22659  
Beachwood, OH 44122

## PURCHASE ORDER

**Deliver To** CITY OF BEACHWOOD  
SHIPPING AND RECEIVING  
23355 MERCANTILE ROAD  
BEACHWOOD, OH

Page Number 1  
P.O. Number 2012-03287  
Req. Number 12-121-0022-A  
P.O. Date 09/19/2012  
Ship Via  
Terms

**Vendor** 00116  
Business Card  
P.O. BOX 15796  
WILMINGTON, DE 19886-5796

ALL INVOICES MUST CONTAIN A FEDERAL TAXPAYER IDENTIFICATION NUMBER AND SHOULD BE FORWARDED TO THE BILL TO ADDRESS DETAILED ABOVE. THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL BILLS AND PACKAGES. Material on this order is from the Ohio Sales Tax and Federal Excise Taxes.

Line	Description	Account	Qty	Unit	Price/Unit	Amount
001	OFFICE SUPPLIES	101.121.56290				\$200.00
002	BUSINESS EXPENSE	101.121.55390				\$3,000.00

Purchase Order Total: \$3,200.00

FROM: 10/1/12 TO 12/31/12

### DIRECTOR OF FINANCE CERTIFICATE

It is hereby certified that the amount required to meet and/or satisfy the contract, agreement, obligation, payment or expenditure for the above, has been lawfully appropriated or authorized or directed for such purpose and is in the Treasury or is in the process of collection and is free from any obligation or certification now outstanding.

  
\_\_\_\_\_  
DIRECTOR OF FINANCE



Attn: Accounts Payable  
P.O. Box 22659  
Beachwood, OH 44122

## PURCHASE ORDER

**Deliver To** CITY OF BEACHWOOD  
SHIPPING AND RECEIVING  
23355 MERCANTILE ROAD  
BEACHWOOD, OH

Page Number 1  
P.O. Number 2013-00001  
Req. Number 12-121-0047-A  
P.O. Date 01/03/2013  
Ship Via  
Terms

**Vendor** 00116  
Business Card  
P.O. BOX 15796  
WILMINGTON, DE 19886-5796

ALL INVOICES MUST CONTAIN A FEDERAL TAXPAYER IDENTIFICATION NUMBER AND SHOULD BE FORWARDED TO THE BILL TO ADDRESS DETAILED ABOVE. THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL BILLS AND PACKAGES. Material on this order is from the Ohio Sales Tax and Federal Excise Taxes.

Line	Description	Account	Qty	Unit	Price/Unit	Amount
001	OFFICE SUPPLIES	101.121.56290				\$200.00
002	BUSINESS EXPENSES	101.121.55390				\$3,000.00

Purchase Order Total: \$3,200.00

THREE MONTH BLANKET FOR MAYOR'S CREDIT CARD FOR OFFICE SUPPLIES & BUSINESS EXPENSES  
FROM: 1/2/13 TO 3/31/13

### DIRECTOR OF FINANCE CERTIFICATE

It is hereby certified that the amount required to meet and/or satisfy the contract, agreement, obligation, payment or expenditure for the above, has been lawfully appropriated or authorized or directed for such purpose and is in the Treasury or is in the process of collection and is free from any obligation or certification now outstanding.

  
\_\_\_\_\_  
DIRECTOR OF FINANCE



MARCH 2013

Business Expense Detail Form

Date 2-11-13  
Vendor MARRIOTT CLEVELAND EAST  
Amount \$ ~~66.27~~ \$35.52 + \$30.75

Public Purpose of Meeting GENERAL UPDATE WITH BET.  
UNIVERSITY HOSP. ANUJA & BEACHWOOD

Attendees (First Name and Last Name) Mayor Merle S. Gorden - BOB YOUNG -  
MONTY ANUJA - ALFRED RANKIN JR

Merle S. Gorden  
Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122  
CHECK: 1054  
TABLE: 45/1  
SERVER: 133 WESTON  
DATE: FEB11'13 8:21AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 03317Z  
MAYOR GORDEN

SUBTOTAL: 25.75

TIP: 5.00

TOTAL: 30.75

*Mike S. Gorden*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

BOB YOUNG

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
133 WESTON  
45/1 1054 GST 2  
FEB11'13 7:35AM  
2 ALL AMERICAN 23.90  
SUBTOTAL 23.90  
TAX 1.85  
PAYMENT DUE \$25.75

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122  
CHECK: 1058  
TABLE: 41/1  
SERVER: 19 DELORIAN  
DATE: FEB11'13 8:28AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 04220Z  
MAYOR GORDEN

SUBTOTAL: 29.52

TIP: 6.00

TOTAL: 35.52

*Mark S. Gach*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
19 DELORIAN 1  
41/1 1058 GST 2  
FEB11'13 8:19AM

1 ALL AMERICAN	11.95
1 MUFFIN	4.50
1 BACON	5.50
1 SM V-8	2.95
1 COFFEE	2.50
SUBTOTAL	27.40
TAX	2.12
PAYMENT DUE	\$29.52

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY

Business Expense Detail Form

Date

2-13-13

Vendor

MOXIE

Amount

\$ 37.20

Public Purpose of Meeting

INTERESTED IN PROVIDING  
"IT" SERVICES TO HELP IN MANAGEMENT

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden

TERRY SILVER

Approval Signature

*Merle S. Gorden*

Attach Re

Moxie/Red  
3355 Richmond Road  
Cleveland, Ohio

60 Joshua H

Tbl 25/1 Chk 1869 Gst 2  
Feb13'13 12:20PM

1 Sandwich spec	12.50
1 mac n cheese	13.50
1 *Soft Drink	2.95

Subtotal	28.95
TAX	2.25
Amount Due	31.20

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie

3355 Richmond Road  
Cleveland, Ohio (216 ) 831-5599

\*\*\*\*\*

Date: Feb13'13 01:03PM

Card Type: Master Card

Acct #: XXXXXXXXXXXX8755

Card Entry: SWIPED

Trans Type: PURCHASE

Auth Code: 02177Z

Check: 1869

Table: 25/1

Server: 60 Joshua H

Subtotal: 31.20

Gratuity:

6.00

Total:

37.20

Signature:

*Merle S. Gorden*

\*\*\*\*\* Customer Copy \*\*\*\*\*

TERRY SILVER

Business Expense Detail Form

Date

2-20-13

Vendor

MAGGIANOS

Amount

\$ 84.41

Public Purpose of Meeting

OFFERING WELLNESS PROGRAMS  
FOR RESIDENTS OF BUD & ALL CITY EMPLOYEES

Attendees (First Name and Last Name)

Mayor Merle S. Gorden - DR. TOM.

ABELSON - PAMELA HOLMES - Kimberly OH

Approval Signature

Merle S. Gorden

Attach Receipt Here

# MAGGIANO'S

Little Italy

MAGGIANOS-BEACHWOOD 196

MERCHANT ID

02/20/13 12:31:56 T013

MIKE G CHK #006

CHARGE 1

MC

XXXXXXXXXXXX8755

GORDEN/MAYOR

AUTH # 04649Z

CHARGE AMOUNT 70.41

MAGGIANO'S

Little Italy  
TOTAL 87.41

GUEST COPY

WE WELCOME YOUR COMMENTS!

PLEASE CALL US AT 1-800-983-4637

OR VISIT US AT WWW.MAGGIANOS.COM

*Mike G*

MAGGIANO'S

Maggiانو's

Little Italy

Perfect for Any Occasion

#046 MIKE GT013

02/20/13 11:41:00 #00196

CHECK #0006

\*\*\*\*\*

YOUR OPINION MATTERS

We invite you to complete our  
GUEST EXPERIENCE SURVEY

YOU COULD WIN \$1,000

A WINNER EVERY DAY!

MAGGIANO'S

From browser address bar type

www.maggianos-survey.com

Your personal code:

058L XUAN ADWE

Please enter within  
the next 4 days

No purchase necessary.

Must be 18 or older.

Void where prohibited.

See website for complete rules  
and sweepstakes details.

\*\*\*\*\*

MAGGIANO'S

ADD SALMON 5.00

COFFEE 2.95

MAGGIANO'S SALAD 4.50

CHZ RAV TODAY 12.95

L-SHRIMP SCAMPI 15.95

SIDE ITALIAN SAL 4.50

SPINACH SALAD 12.50

Subtotal 65.35

Sales Tax 5.06

TOTAL 70.41

THANK YOU!!!

We welcome your comments.

\*\*\*

www.maggianos.com

(800) 983-4637

MAGGIANO'S

Little Italy

Business Expense Detail Form

Date

2/21/13

Vendor

WASHINGTON PLACE

Amount

\$ 52.10

Public Purpose of Meeting

REVIEW OF UPCOMING  
OPPORTUNITIES.

Attendees (First Name and Last Name)

Mayor Merle S. Gorden - NANCY LESIC

Approval Signature

Merle S. Gorden

Attach Receipt Here

# Washington Place

RISTRO & INN

\*\*\*\*\*CREDIT CARD VOUCHER\*\*\*\*\*

2203 Cornell Road  
Cleveland, Ohio 44108

(216)791-6500

Date: Feb21'13 01:27PM  
Card Type: Master Card  
Acct #: XXXXXXXXXXXX8755  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 02816Z  
Check: 7040  
Table: 54/1  
Server: 126 McKensy

Subtotal: 43.10

Gratuity: 9.00

CVI Donation: 52.10

Total:

Signature:

x Merle S. Gade  
Customer Copy

# Washington Place

RISTRO & INN

2203 Cornell Road  
Cleveland, Ohio 44108  
(216)791-6500

126 McKensy

Tbl 54/1 Chk 7040 Gst 2  
Feb21'13 12:18PM

1 Soup	6.00
2 Burger	24.00
2 Soda	5.00
2 Coffee	5.00

Subtotal	40.00
Tax	3.10
Amount Due	43.10



Business Expense Detail Form

Date

2/26/13

Vendor

MARriott CLEVELAND EAST

Amount

\$ 25.02

Public Purpose of Meeting

GENERAL REVIEW OF COUNTY

ADMIN. PROGRESS

Attendees (First Name and Last Name)

Mayor Merle S. Gordon - STUART GARSON

Merle S. Gordon  
Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122  
CHECK: 1028  
TABLE: 45/1  
SERVER: 19 DELORIAN  
DATE: FEB26'13 8:17AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 03710Z  
MAYOR GORDEN

SUBTOTAL: 21.02  
TIP: 4.00  
TOTAL: 25.02  
*Mike L. Guden*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
19 DELORIAN 1  
45/1 1028 GST 2  
FEB26'13 7:58AM

1 GOOD START BKFST 9.95  
1 OATMEAL W/FRUIT 5.75  
1 COFFEE 2.50  
SUBTOTAL 18.20  
TAX 2.82  
PAYMENT DUE \$21.02

Gratuity: \_\_\_\_\_  
TOTAL: \_\_\_\_\_  
PRINT NAME: \_\_\_\_\_  
ROOM #: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_  
SIGN ABOVE FOR ROOM CHARGES ONLY

Business Expense Detail Form

Date 3-1-13  
Vendor City Club  
Amount \$ ~~130.00~~ 60.00  
Public Purpose of Meeting Friday Forum w/ Lee Fisher

Attendees (First Name and Last Name) ~~Mayor Merle S. Gordon~~  
Jim Smith

Merle S. Gordon  
Approval Signature

Attach Receipt Here

THE CITY CLUB OF CLEVELAND  
850 EUCLID AVE  
CLEVELAND, OH 441143306

TERMINAL ID: 007029333  
MERCHANT #: 345396292009

MC  
#XXXXXXXXXXXX8755

SALE

BATCH: 000512 INVOICE: 0129360100  
DATE: FEB 28, 13 TIME: 18:39  
SQ: 013 AUTH NO: 002002

TOTAL \$60.00

CUSTOMER COPY

**Debbie Noble**

**From:** Peggy Zone Fisher <PZFisher@diversitycenterneo.org>  
**Sent:** Friday, January 04, 2013 5:51 PM  
**Subject:** Lee Fisher - Speech at the Cleveland City Club

Just wanted you to know that Lee will be speaking at the Friday, March 1, 2013 City Club Friday Forum.  
The title of his talk is "Want to Change the World? Start with your City".

Below is information on how to reserve a seat. Hope you can join us!

Thanks.

Peggy

*City Club members who do not wish to provide a credit card should call The City Club, Toll-Free at 888-223-6786 or locally at (216) 621-0082 to secure a reservation. The City Club of Cleveland requires a credit card number when making a reservation. All credit cards will be charged 24 hours prior to the scheduled event time. Only changes made before that time can be cancelled or changed without penalty. If you fail to cancel or fail to show, your credit card will be charged. All reservations must be made 24 hours prior to the start of the program. Reservations will be held 15 minutes past the start of a program, such as 12:15 PM for noon programs. Reservations will then be open to standby ticketing. Tickets will be held at the front desk on the day of the event.*

Peggy Zone Fisher  
President & CEO

The Diversity Center of Northeast Ohio  
3659 Green Road  
Suite 220  
Cleveland, Ohio 44122

216 752-3000 ext 227  
216 752-4974 Fax

[pzfisher@diversitycenterneo.org](mailto:pzfisher@diversitycenterneo.org)  
<http://about.me/Pzfisher>  
<http://www.linkedin.com/pub/peggy-zone-fisher/6/a99/b4b>  
[www.diversitycenterneo.org](http://www.diversitycenterneo.org)

Reserved w/

1-8-13  
Carrie Miller

MSG  
+ JAD

PSY P  
YES  
ASK J.M. IF  
HE WOULD  
LIKE TO  
ATTEND  
WITH  
ME

Business Expense Detail Form

Date 3-4-13  
Vendor Jack's Deli  
Amount \$ 127.85

Public Purpose of Meeting dinner provided for Council  
prior to early meetings before Council meeting.

Attendees (First Name and Last Name) Mayor Merle S. Gorden

Merle S. Gorden  
Approval Signature

Attach Receipt Here

JACK'S DELI

Date: 3/4/2013 Time: 3:40:29 PM

Status: Approved

Card Type: Master Card  
Card Number: XXXXXXXXXXXX8755

Expiration Date:

Swipe/Manual: Manual

Server ID: 165

Server Name: Taylor

Check Number: 987250

Check Name:

Tab Number: 7049

Profit Center ID: 3

Profit Center: Table Sales

Number Of Covers: 1

Persons: 1

Card Number: XXXXXXXXXXXX8755

Card Owner: Manual Ent

AMOUNT 107.85

TIP 20.00

TOTAL 127.85

Approval: 01254Z

I AGREE TO COMPLY WITH  
THE CARDHOLDER AGREEMENT

Merle S. Gorden / JN  
Customer Signature  
RESTAURANT COPY

# CITY OF Beachwood

25325 FAIRMOUNT BLVD • BEACHWOOD • OHIO 44122 • (216) 292-1901 • FAX (292) 292-1984

MAYOR  
MERLE S. GORDEN

**Fax – for delivery by 4:00 p.m. on  
Monday, March 4, 2013**

To: Jack's Deli  
Fax: 216-691-6837 / 1 page  
Date: March 4, 2013  
From: City of Beachwood (Debbie/ Mayor's Office)  
MasterCard [REDACTED] exp. 01/14 code 693  
Please bring receipt.

4 Extra Lean Corned Beef Sandwiches / condiments on side

1 Turkey off Bone Sandwiches on Wheat / condiments on side

1 Turkey off Bone Sandwich on RYE/ condiments on side

Please wrap all above sandwiches in halves.

MM  
MMg 2 Turkey off Bone Sandwiches on White Challah, No Seeds, No Lettuce,  
No Tomato (Mayo on side)

NO Sliced Tomatoes Needed.  
Pickles for 5 only.

1 Pint Potato Salad  
2 Pints Cole Slaw  
1 Quart of Pea Soup w/ 8 paper bowls  
1 Quart of Mushroom Barley Soup

Saul ~~Change~~ Change order!  
Please add!

1 tuna sandwich on Rye  
with French Fries

## TX Report

P 1  
 03/04/2013 09:33  
 Serial No. 6120299  
 TC: 186239

Destination	Start Time	Time	Prints	Result	Note
96916837	03-04 09:33	00:00:35	001/001	OK	L1

Note L1: Main Circuit, L2: Sub Circuit, TMR: Timer, POL: Poll, ORG: Original, FME: Frame Erase TX,  
 MIX: Mixed Original, CALL: Manual Communication, CSRC: CSRC, FWD: Forward, PC: PC-FAX,  
 BND: Bind, SP: Special Original, FCODE: F-Code, RTX: Re-Tx, RLY: Relay, MBX: Confidential,  
 BUL: Bulletin, SIP: SIP-Fax, IPADR: IP Address Fax, I-FAX: Internet Fax

Result OK: Communication OK, S-OK: Stop Communication, PW-OFF: Power Switch OFF,  
 TEL: RX from TEL, NG: Other Error, Cont: Continue, No Ans: No Answer,  
 Refuse: Receipt Refused, Busy: Busy, M-Full: Memory Full,  
 LOVR: Receiving length Over, POVER: Receiving page Over, FIL: File Error,  
 DC: Decode Error, MDN: MDN Response Error, DSN: DSN Response Error.

CITY OF  
*Beachwood*

25525 FAIRMOUNT BLVD • BEACHWOOD • OHIO 44122 • (216) 292-1901 • FAX (292) 292-1984

MAYOR  
 MERLE S. GORDEN

**Fax – for delivery by 4:00 p.m. on  
 Monday, March 4, 2013**

To: Jack's Deli  
 Fax: 216-691-6837 / 1 page  
 Date: March 4, 2013  
 From: City of Beachwood (Debbie/ Mayor's Office)  
 MasterCard [REDACTED] exp. 01/14 code 693  
**Please bring receipt.**

- 4 Extra Lean Corned Beef Sandwiches / condiments on side
- 1 Turkey off Bone Sandwiches on Wheat / condiments on side
- 1 Turkey off Bone Sandwich on RYE/ condiments on side

**Please wrap all above sandwiches in halves.**

2 Turkey off Bone Sandwiches on White Challah, No Seeds, No Lettuce,  
 No Tomato (Mayo on side)

NO Sliced Tomatoes Needed.  
 Pickles for 5 only.

- 1 Pint Potato Salad
- 2 Pints Cole Slaw
- 1 Quart of Pea Soup w/ 8 paper bowls

## Debbie Noble

**From:** Debbie Noble  
**Sent:** Thursday, February 28, 2013 3:28 PM  
**To:** ~~Margaret Anne Cannon~~; Mayor Gorden; Eisen, Saul; Goodman, Fred; Horwitz, Martin;  
~~Jacobs, Mel~~; Linick, Brian; Mintz, Mark; Wachter, Mark  
**Cc:** Tina Turick  
**Subject:** dinner - Monday night @ 5 p.m.

Please let me know by noon tomorrow if you would like to be included.

Thank you.

Debbie Noble, Executive Secretary  
for Mayor Merle S. Gorden  
216-292-1905

CITY OF  
*Beachwood*

25325 FAIRMOUNT BLVD.  
BEACHWOOD, OHIO 44122



Like us on Facebook



Follow us on Twitter



[www.beachwoodohio.com](http://www.beachwoodohio.com)

All records of the City, including this message and any response to it, are public records unless the records are specifically exempted from disclosure under the Ohio Public Records Act. Public Records are available to the public and media upon request. If you have received this communication erroneously, please immediately notify the sender of the communication

MSG

MAC

mmg

SE

MM

TT

FSC



**Business Expense Detail Form**

Date 3-4-13

Vendor Mariott

Amount \$ 39.62

Public Purpose of Meeting UPDATE ON CHAMBER  
BUSINESS

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Wayne Lawrence

Merle S. Gorden  
 Approval Signature

MARIOTT CLEVELAND EAST  
 RIVER CITY GRILLE RESTAURANT  
 WARENSVILLE HTS, OHIO 44122  
 133 WESTON 1

43/1	1403	GST 2
MAR04'13 7:32AM		
1 ALL AMERICAN	11.95	
1 3-EGG OMELET	11.25	
1 BACON	5.50	
1 COFFEE	2.50	
SUBTOTAL	31.20	
TAX	2.42	
PAYMENT DUE	\$33.62	

Gratuity: 6.00  
 TOTAL: 39.62

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_  
 SIGNATURE: Merle S. Gorden

SIGN ABOVE FOR ROOM CHARGES ONLY

Business Expense Detail Form

Date

3-1-13

Vendor

Shoes + clothes 4 Kids

Amount

\$ 300.00

Public Purpose of Meeting

Jail's Public Annual Event

on 4-15-13

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden

Harriet Gorden - Please find the Mayor's ck. # 943  
attached for \$150 reimbursement to the City.

Approval Signature

Merle S. Gorden

Attach Receipt Here

See attached

## Quick Links

[Purchase Event Tickets](#)

[Purchase Raffle Tickets](#)

[Event Menu](#)

[More Information](#)

[Directions to Moxie](#)

## Check out these fabulous raffle prizes:

### Grand Prize:

Trip to Miami\* including round-trip airfare for two (2), dinner for two (2) at Red, the Steakhouse in South Beach, including wine and a decadent custom menu created just for you! Plus a two (2) night stay at the luxurious Eden Roc Hotel & Spa.

**Value: \$2,000.**

See [www.sc4k.org/fools](http://www.sc4k.org/fools) for other prizes.

Tickets are \$50 each or three (3) for \$100 and can be purchased [here](#) by Monday, April 8, 2013.

Drawing will be held on 4/15/13

***Need not be present to win.***

All proceeds benefit SC4K.  
\*Certain rules and restrictions apply

## Raffle Supporters:

Eden Roc,  
a Renaissance Hotel & Spa  
Red, the Steakhouse



## 5:30 Champagne Toast

Monday, April 15, 2013

6:00 - 9:00 p.m. Moxie, the Restaurant  
3355 Richmond Rd., Beachwood, OH 44122

Get ready for another evening of foolishly good fun! Now in its 6th year, Fool's Frolic is a one-of-a-kind event at Moxie, the Restaurant to benefit Shoes and Clothes for Kids. This year's event will once again feature fine fare, libations, and entertainment as we transform Moxie into a Swanky Cocktail Lounge befitting of this year's theme: Shaken not Stirred.

## Tickets:

\$150 per person (\$75 tax-deductible):

Includes fabulous food, open bar, and valet parking. Space is Limited.

**REGISTER**

Please register by Monday, April 8th. Tickets are non-refundable.

## Event Sponsors:

### Merry Makers:

**Char & Chuck Fowler**



**Children's Hospital**

Cleveland Clinic

**FOREST CITY**  
ENTERPRISES



### Revelers:

### In-Kind Supporters:

All-Star Valet  
Anthony Franchino  
Photography  
Shutterbooth

Printing Donated by:  
Consolidated Graphics

Design Donated by:  
Gusto Designs, LLC

Glenmede Investment and Wealth Management  
Huntington Bank  
Strassman Insurance Services

### Jesters:

DDR Corp., Melamed Communications & Superior Beverage Group

### Event Planning Committee:

Susan Mikhail, Chair \*Scott Simon, Honorary Chair \*Michelle Amato  
\*Peter D'Amato \*Nikki Glick \*Chris McMahan \*Sarah Melamed  
\*Elizabeth Nici \*Renny Wolfson

### Host Committee Members:

Michelle Amato, Chair \*Brad Friedlander, Honorary Chair  
\*Andrew Barkley \*Michelle Barsoum \*Seth Briskin \*Karen Carmen \*JJ DiGeronimo \*Brandon Duber \*Dave Gaddis \*Sid Good \*Mayor Merle S. Gordon \*Jodi Hall \*Jeff Hall \*Stacie Halpern \*Heather Huston Barkley  
\*Tracy Jemison \*Allan Krulak \*Niccole McEwen \*Mark Mintz \*Amy Nadler \*Larrie Nadler \*Steve Putinski \*Hallie Rich \*Judy Ulrich \*Mike Zitzelsberger

### Shoes and Clothes for Kids

(SC4K) is the only nonprofit organization in Greater Cleveland providing new shoes and clothes at no charge throughout the year to thousands of children in need. Through a network of 35 partners, SC4K positively impacts the lives of area children by giving them the self-esteem and confidence that comes from having brand new shoes and clothes.

Learn more at [www.sc4k.org](http://www.sc4k.org) or call 216.881.SHOE (7463).

### Forward email

 SafeUnsubscribe



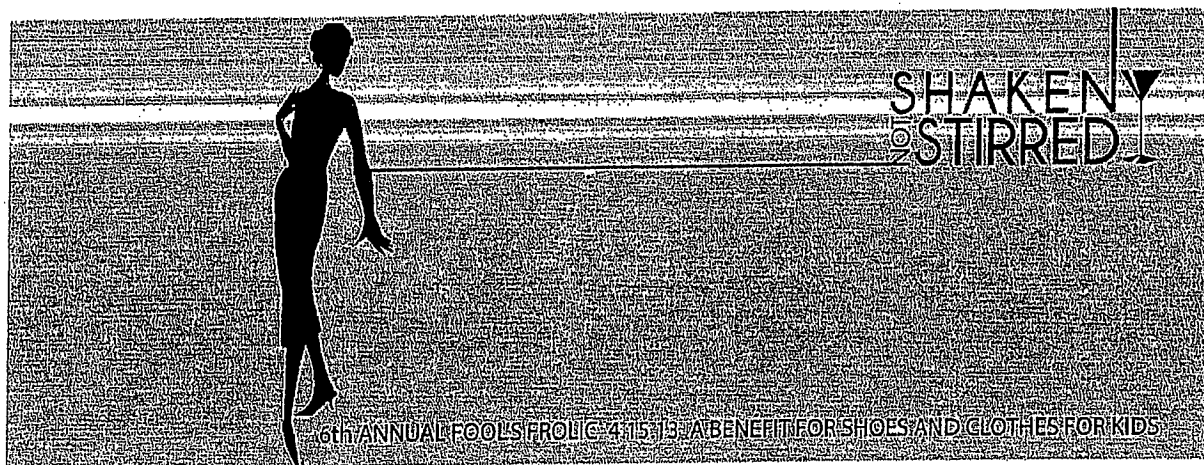
Try it FREE today.

This email was sent to [amatom@ccf.org](mailto:amatom@ccf.org) by [sboyes@sc4k.org](mailto:sboyes@sc4k.org) |  
[Update Profile/Email Address](#) | Instant removal with [SafeUnsubscribe™](#) | [Privacy Policy](#).  
Shoes and Clothes for Kids | 3311 Perkins Ave. Suite 205 | Cleveland | OH | 44114

Please consider the environment before printing this e-mail

Cleveland Clinic is ranked one of the top hospitals in America by U.S. News & World Report (2012). Visit us online at <http://www.clevelandclinic.org> for a complete listing of our services, staff and locations.

Confidentiality Note: This message is intended for use only by the individual or entity to which it is addressed



## Event Menu

### Passed Appetizers

- Costini:
  - Mediterranean (prosciutto, zucchini, feta, pesto)
  - Tomato and mozzarella with balsamic and evoo
  - Truffled mushroom and goat cheese
- Cornets:
  - Smoked salmon
  - Goat Cheese
- Roasted tomato tarts, basil pesto, gorgonzola, balsamic-red onion jam
- Lamb lollipops with roasted tomato, olive and feta

### Raw Bar with Assorted Accompaniments

- Oysters
- Marinated calamari
- Ceviche
- Shrimp cocktail
- Mussels

### Sushi Station

- House made sushi rolls

### Tartar Station



- Beef tenderloin, caper-dijon vinaigrette
- Tuna, ponzu, chile aioli and wasabi caviar
- Salmon, horseradish and crème fraiche

### Skewer Station

- Beef tenderloin kabobs, horseradish crème fraiche
- Leg of lamb skewers, cucumber raita
- Herb marinated chicken skewer, spicy harissa
- Crimini mushroom & sweet onion, basil pistou

### Dessert Station

- Limoncello Sorbetto
- Strawberry-vodka sherbet
- Mojito Granita

<b>MERLE S. GORDEN</b> 08-91 <b>ELECTION COMMITTEE</b>		Date <u>3/8/13</u>	943
Pay to the Order of	<u>CITY OF BEACHWOOD</u>	\$ <u>150</u>	<u>00</u> <u>XX</u>
<u>ONE HUNDRED FIFTY</u>		Dollars	 Security features are included Details on back
 KeyBank National Association Beachwood, Ohio 44122 1-800-KEY2YOU Key.com®		<u>Merle S. Gorden</u>	
For	<u>FOOLS FROLIC</u>		
⑆041001039⑆		20061141⑆ 0943	

© Clarke American GUARDIAN® SAFETY BLUE WBL

PTD  
25057  
3-21-13

CITY OF  
*Beachwood*

Attn: Accounts Payable  
P.O. Box 22659  
Beachwood, OH 44122

## PURCHASE ORDER

**Deliver To** CITY OF BEACHWOOD  
SHIPPING AND RECEIVING  
23355 MERCANTILE ROAD  
BEACHWOOD, OH

Page Number 1  
P.O. Number 2013-00001  
Req. Number 12-121-0047-A  
P.O. Date 01/03/2013  
Ship Via  
Terms

**Vendor** 00116  
Business Card  
P.O. BOX 15796  
WILMINGTON, DE 19886-5796

ALL INVOICES MUST CONTAIN A FEDERAL TAXPAYER IDENTIFICATION NUMBER AND SHOULD BE FORWARDED TO THE BILL TO ADDRESS DETAILED ABOVE. THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL BILLS AND PACKAGES. Material on this order is from the Ohio Sales Tax and Federal Excise Taxes.

Line	Description	Account	Qty	Unit	Price/Unit	Amount
001	OFFICE SUPPLIES	101.121.56290				\$200.00
002	BUSINESS EXPENSES	101.121.55390				\$3,000.00

Purchase Order Total: \$3,200.00

THREE MONTH BLANKET FOR MAYOR'S CREDIT CARD FOR OFFICE SUPPLIES & BUSINESS EXPENSES  
FROM: 1/2/13 TO 3/31/13

### DIRECTOR OF FINANCE CERTIFICATE

It is hereby certified that the amount required to meet and/or satisfy the contract, agreement, obligation, payment or expenditure for the above, has been lawfully appropriated or authorized or directed for such purpose and is in the Treasury or is in the process of collection and is free from any obligation or certification now outstanding.

*David A. Papp*

~~APR~~  
~~MAY~~ - 2013  
MAY 2013

Business Expense Detail Form

Date

4-4-13

Vendor

MARRIOTT

Amount

\$ 60.32 -

Public Purpose of Meeting

REVIEW OF CYB

CURRENT STATUS.

Attendees (First Name and Last Name)

Mayor Merle S. Gorden - WAYNE

LAWRENCE - SHENISE THOMAS, Jim South

Approval Signature

*Merle S. Gorden*

Attach Receipt Here

--



MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122  
CHECK: 1404  
TABLE: 44/1  
SERVER: 133 WESTON  
DATE: APR04'13 8:26AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 03190Z  
MAYOR GORDEN

SUBTOTAL: 50.32

TIP: 10.00

TOTAL: 60.32

*Neill S. Gaden*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT

\*KEEP ONE COPY FOR YOUR RECORDS\*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARENSVILLE HTS, OHIO 44122  
133 WESTON  
44/1 1404 GST 4  
APR04'13 7:26AM

2 EGG FRITTATA	23.50
1 ALL AMERICAN	11.95
1 HAM & CHEDDAR	11.25
SUBTOTAL	46.70
TAX	3.62
PAYMENT DUE	\$50.32

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY

Business Expense Detail Form

Date

4-11-13

Vendor

CEDAR CREEK GRILL

Amount

\$ 45.63

Public Purpose of Meeting

ECONO. DEX PASS

OPPORTUNITIES

Attendees (First Name and Last Name)

Mayor Merle S. Gorden - JUSTIN

BERNS

Approval Signature

Merle S. Gorden

Attach Receipt Here

\*\*\*\*\*

\*\*\*\*\*CREDIT CARD VOUCHER\*\*\*\*\*

Cedar Creek Grille  
2101 Richmond Rd.  
Beachwood, Oh 44122  
216-342-5177

Date: Apr11'13 01:16PM  
Card Type: Mastercard  
Acct #: XXXXXXXXXXXX8755  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 08881Z  
Check: 1596  
Table: 52/1  
Server: 1013 Lauren D

Subtotal: 38.63

TIP: 2.00

TOTAL: 45.63

\* A gratuity is not included \*

PLEASE KEEP THIS COPY FOR YOUR  
PERSONAL RECORDS

CUSTOMER COPY

*Justin Berks*  
JUSTIN BERKS

CEDAR CREEK GRILLE

2101 Richmond Rd.  
Beachwood, Ohio 44122  
216-342-5177

1013 Lauren D

Tbl 52/1 Chk 1596 Gst 2  
Apr11'13 12:13PM

1 Cedar Salmon	15.00
1 CCG Burger	12.00
2 Soft Drink	5.90
1 Coffee	2.95

Subtotal	35.85
Tax	2.78
01:05PM Total	38.63

Thank You For Dining with Us!

Business Expense Detail Form

Date 4-15-13  
Vendor NIGHTTOWN  
Amount \$ 52.02

Public Purpose of Meeting REVIEW OF CITY'S BOND  
COUNCIL & WOULD LIKE AN OPPORTUNITY

Attendees (First Name and Last Name) Mayor Merle S. Gorden - Bill MASON -  
MATT STOUT. FROM BRICKER &  
ECKER LAW FIRM.

Merle S. Gorden  
Approval Signature

Attach Receipt Here

\*\*\*\*\*  
\*\*\*\* CHARGE VOUCHER \*\*\*\*  
\*\*\*\*\*

Nighttown Restaurant  
12387 Cedar Road  
Cleveland Heights, Ohio 44106

CHECK: 3615  
TABLE: 101/1  
SERVER: 34 TOM  
DATE: APR15'13 12:54PM  
CARD TYPE: Master Card  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 02744Z  
RESEARCH: 310516009644  
MAYOR GORDEN

SUBTOTAL: 44.02  
Gratuity: 8.00  
Total: 52.02

Signature:

x *Mike S. Gordon*

\*\*\*\*\*  
Bill MASON  
Matt Stott

Nighttown Restaurant - Patio  
12387 Cedar Road  
(216) 795-0550

34 TOM

-----  
101/1      CHK 3615    GST 3  
APR15'13 12:10PM  
-----

1 CAESAR CHICKEN	14.95
1 TURKEY WRAP	10.95
1 FISH & CHIPS	14.95
Subtotal	40.85
Tax	3.17
Amount Due	\$44.02

\*\*\*\*\*  
NIGHTTOWN JAZZ !

Ask your server for information  
on upcoming events.

\*\*\*\*\*

Business Expense Detail Form

Date 4-16-13

Vendor Moxie

Amount \$ 41.10

Public Purpose of Meeting REVIEW OPPORTUNITIES  
BETWEEN ISRAEL - FEDERATION - BENCAWOOD

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Stephen Hoffman

Merle S. Gorden  
Approval Signature

Attach Receipt Here

Moxie/Red  
3355 Richmond Road  
Cleveland, Ohio

33 Diane S

Tbl 20/1 Chk 1935 Gst 2  
Apr16'13 12:08PM

1 Sandwich spec	13.00
1 Moxie Burger	12.75
1 *Soft Drink	2.95
1 Coffee	2.95

Subtotal	31.65
TAX	2.45
Amount Due	34.10

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie  
3355 Richmond Road  
Cleveland, Ohio (216 ) 831-5599  
\*\*\*\*\*  
Date: Apr16'13 12:53PM  
Card Type: Master Card  
Acct #: XXXXXXXXXXXX8755  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 09818Z  
Check: 1935  
Table: 20/1  
Server: 33 Diane S

Subtotal: 34.10

Gratuity: 7.00

Total: 41.10

Signature:

Merle S. Gorden  
\*\*\*\*\* Customer Copy \*\*\*\*\*

~~CONFIDENTIAL~~

Business Expense Detail Form

Date

4-17-13

Vendor

Bruce's

Amount

6.17

Public Purpose of Meeting

BREAKFAST MTG WITH

RESIDENT @ STRATTON HOUSE

Attendees (First Name and Last Name)

Mayor Merle S. Gordon

Mark S. Gault

Approval Signature

Attach Receipt Here

**BRUEGGER'S**  
14483 Cedar Road  
South Euclid, OH 44121  
216-381-5576

4/17/2013 5:36:57 AM Carry  
Order Number: 668601  
1 Prepared Bagel New 1.39  
1 Bagel w/ Prem Spread 2.39  
1 Bagel w/ Prem Spread 2.39

**\*\*\*Guest Survey\*\*\***

SHARE YOUR FEEDBACK WITHIN 3 DAYS AT  
[WWW.BRUEGGERSSURVEY.COM](http://WWW.BRUEGGERSSURVEY.COM)  
AND SAVE \$1 OFF A \$4 PURCHASE

0206 - 892 - 668601

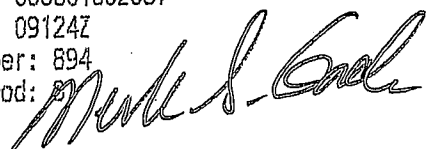
VALIDATION CODE: \_\_\_\_\_  
PLU 3266

NOT VALID WITH OTHER OFFERS  
EXPIRES 14 DAYS FROM DATE ON RECEIPT  
\*\*\*\*\*

Discount Total: 0.00  
Sub. Total: 6.17  
State & Local Tax: 0.00  
Total: 6.17

Change 0.00  
Master Card: -6.17  
Register:2 Tran Seq No: 668601  
Store No:0206 Zido

Kudos, Comments, Questions?  
Call 1-888-8BAKERY  
[www.brueggers.com](http://www.brueggers.com)

Master Card  
Card Num : XXXXXXXXXXXX8755  
Terminal : 000801802067  
Approval : 09124Z  
Batch Number: 894  
Entry Method: 

I agree to pay the above Total Amount  
according to Card Issuer Agreement.

Signature: \_\_\_\_\_  
Merchant Copy



Business Expense Detail Form

Date

4-21-13

Vendor

Staples

Amount

\$ 15.98

Public Purpose of Meeting

Office Supplies

Attendees (First Name and Last Name)

Mayor Merle S. Gorden

Approval Signature

Merle S. Gorden

Attach Receipt Here

**STAPLES**

that was easy.

Low prices. Every item. Every day.

5950 Mayfield Rd.

Mayfield Heights, OH 44124

(440) 684-0302

SALE

1619870 3 003 98795

0669 04/21/13 02:55

QTY SKU

PRICE

1 SILVER MESH DESK D

095787156781

11.99N

1 ARC TO DO REFILL P

718103140010

3.99N

SUBTOTAL

15.98

Tax Exempt Number 4229377223

TOTAL

\$15.98

MasterCard

15.98

Card No.: XXXXXXXXXXXX8755 [S]

Auth No.: 05027Z

**TOTAL ITEMS - 2**

Save with Staples Brand products,  
the most trusted brand in office products.

THANK YOU FOR SHOPPING AT STAPLES !

Shop online at [www.staples.com](http://www.staples.com)

Rewards members now get: 5% back in  
rewards on everything! All products and  
services-even technology. Free shipping  
on staples.com orders. For full program  
details visit [staplesrewards.com](http://staplesrewards.com).



0 6 6 9 0 4 2 1 1 3 9 8 7 9 5 0 3

**Business Expense Detail Form**

Date 4-25-13  
 Vendor Moxie  
 Amount \$ 39.29

Public Purpose of Meeting REVIEW OF STATION #1 REPAIR  
& DISCUSSIONS RE FUTURE #2 STATION.

Attendees ( First Name and Last Name) Mayor Merle S. Gorden  
Chief Pat Kearns

Merle S. Gorden  
 Approval Signature

**Attach Rece**

Moxie/Red  
 3355 Richmond Road  
 Cleveland, Ohio

45 Daniel G

Tbl 24/1 Chk 1975 Gst 2  
 Apr25'13 11:49AM

1 Caesar Salad	9.75
1 add chix	2.50
1 Moxie Burger	12.75
2 Iced Tea	5.90

Subtotal	30.90
TAX	2.39
Amount Due	33.29

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie  
 3355 Richmond Road  
 Cleveland, Ohio (216 ) 831-5599  
 \*\*\*\*\*  
 Date: Apr25'13 12:59PM  
 Card Type: Master Card  
 Acct #: XXXXXXXXXXXX8755  
 Card Entry: SWIPED  
 Trans Type: PURCHASE  
 Auth Code: 07479Z  
 Check: 1975  
 Table: 24/1  
 Server: 45 Daniel G

Subtotal: 33.29

Gratuity:

Total:

Signature:

\*\*\*\* Customer Copy \*\*\*\*

CHIEF KEARNS

Business Expense Detail Form

Date

4-26-13

Vendor

Marriott

Amount

\$

50.72

Public Purpose of Meeting

REVIEW OF FD #7

STATION REPAIR

Attendees (First Name and Last Name)

Mayor Merle S. Gorden

Chief Pat Reams, Bill Griswold

Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122

CHECK: 1749  
TABLE: 45/1  
SERVER: 109 KATHY  
DATE: APR26'13 8:45AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 01623Z  
MAYOR GORDEN

SUBTOTAL: 42.72

TIP: 8.00

TOTAL: 50.72

*Mark S. Gaden*  
CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT

\*KEEP ONE COPY FOR YOUR RECORDS\*

*CHIEF KEARNS*  
*BILL GRISWOLD*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS., OHIO 44122

109 KATHY

45/1 1749 GST 3  
APR26'13 7:30AM

2 ALL TCAN 23.90  
1 FRE FAST 13.25  
SAUSAGE  
1 COFFEE 2.50  
SUBTOTAL 39.65  
TAX 3.07  
PAYMENT DUE \$42.72

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY

Business Expense Detail Form

Date 5-1-13

Vendor Maggianos

Amount \$ 61.61

Public Purpose of Meeting REVIEW OF WORKLOADS &  
FUTURE RESTRUCT. OF L.S. &  
ECONO. DEV

Attendees (First Name and Last Name) Mayor Merle S. Gorden

Tina Turick Debbie Noble

Merle S. Gorden  
Approval Signature

Attach Receipt Here

## LITTLE ITALY ##

Maggiano's

Little Italy

Perfect for Any Occasion

#046 MIKE GT003

05/01/13 12:27:00 #00196

CHECK #0018 MAGGIANO'S

\*\*\*\*\*LITTLE ITALY\*\*\*\*\*  
YOUR OPINION MATTERS

We invite you to complete our  
GUEST EXPERIENCE SURVEY

YOU COULD WIN \$1,000  
A WINNER EVERY DAY!

From browser address bar type:  
[www.maggianos-survey.com](http://www.maggianos-survey.com)

Your personal code:

04A4 PUEA N1JH

MAGGIANO'S  
Please enter within  
the next 4 days  
## LITTLE ITALY ##

No purchase necessary.

Must be 18 or older.

Void where prohibited.

See website for complete rules  
and sweepstakes details.

\*\*\*\*\*

SIDE MAGGIANO'S	4.75
2 ADD-CHICKEN	6.00
L CKN-PICCATA	14.50
ICED TEA	2.95
SODA	2.95

MAGGIANO'S  
SIDE SPAGHETTI 4.25  
CHOPPED SALAD 12.50  
Subtotal 47.90

Sales Tax LITTLE ITALY ##

TOTAL 51.61

THANK YOU!!!

We welcome your comments.

\*\*\*

[www.maggianos.com](http://www.maggianos.com)  
(800) 983-4637

MAGGIANO'S

MAGGIANOS BEACHWOOD 196

MERCHANT ID

05/01/13 13:22:00 1003

MIKE G

CHK #018

CHARGE 1

MC

XXXXXXXXXXXX8755

GORDEN/MAYOR

AUTH # 04741Z

CHARGE AMOUNT 51.61

TIP AMOUNT

10.00

MAGGIANO'S

## LITTLE ITALY ##

WE WELCOME YOUR COMMENTS!

PLEASE CALL US AT 1-800-983-4637  
OR VISIT US AT [WWW.MAGGIANOS.COM](http://WWW.MAGGIANOS.COM)

TINA  
DEBBIE

MAGGIANO'S

Business Expense Detail Form

Date 5-3-13

Vendor Hampton Inn

Amount \$ 232.33

Public Purpose of Meeting

overnight stay for Public  
Safety Directors meeting in Columbus

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden

Approval Signature

Attach Receipt Here

*attached*

*Mayor's credit card*



**Debbie Noble**

**From:** Hampton Confirmed <hampton@res.hilton.com>  
**Sent:** Tuesday, April 23, 2013 3:02 PM  
**To:** Mayor's Office  
**Subject:** Hampton Confirmation #86435475

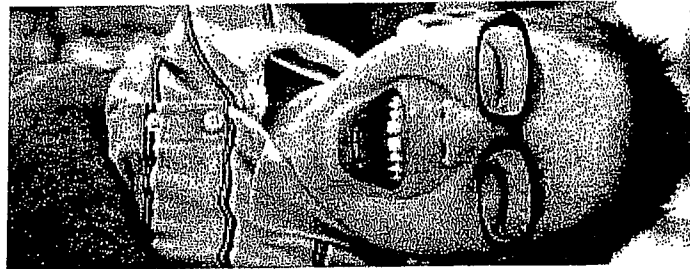


Your reservation?  
**Confirmed!**  
(yeah we were excited too)



**Hampton Inn & Suites Columbus-Easton Area**  
4150 Stelzer Road | Columbus | OH | United States 43230  
T: 1-614-473-9911 | F: 1-614-473-9922

We look forward to seeing you!



[Rooms & Suites](#)

[Dining](#)

[Amenities & Services](#)

[Map & Directions](#)

Thank you for booking with us, Merle Gorden

**Confirmation: 86435475**

[Modify Reservation](#)

**Arrival:**

02 May 2013 3:00 PM

**Departure:**

03 May 2013 12:00 PM

**Rate Information:**

Rate per night:	179.00 USD
Total for Stay per Room:	
Rate	179.00 USD
Taxes	29.98 USD
Total	208.98 USD

**Total for Stay: 208.98 USD**

Includes estimated taxes and service charges. (Gratuities not included.)

**Tax:**

- There is a 16.75% per room per night tax.

**Additional Charges:**

- Self parking: 0.00/night

**Room Information:**

Rooms: 1  
Clients: 1 Adult  
Room Type: 1KNG STUDIO SOFABED NOSMOK  
Preferences: King

Your room type preferences have been submitted with your reservation, and are subject to hotel availability.

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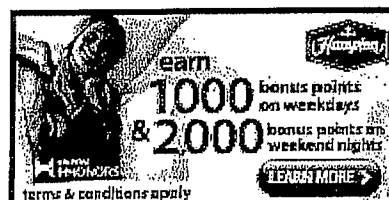
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**Rate Rules and Cancellation Policy:**

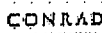
- Your reservation is guaranteed for late arrival.
- Please contact us should you need to cancel your reservation.
- Cancellations are required by 4PM on 01 May 2013 local hotel time.
- Cancellation penalties may apply.

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LAUREN THOMPSON

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enterprise



If you use a debit/credit card to check in, a hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such hold may not be released for 72 hours from the date of check-out or longer at the discretion of your card issuer.

If you need to MODIFY or CANCEL your reservation, [click here](#). Any change to the arrival date, departure date or room type of this reservation is subject to the hotel's availability at the time the change is requested and may result in a possible rate change or an additional fee. For example, shortening or lengthening your reservation is subject to availability and may not be possible at a later date. For more information, please [click here](#) to see all the rules and restrictions applicable to this reservation.

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# Hampton Inn & Suites Columbus-Easton Area

4150 Stelzer Road, Columbus, Ohio, 43230, USA  
1-614-473-9911

## Reservation Confirmation # 86435475

### Hotel

Hampton Inn & Suites Columbus-Easton Area  
4150 Stelzer Road  
Columbus, Ohio 43230  
USA  
Phone: 1-614-473-9911

### Stay Information

Arrival: Thursday, 02 May 2013  
Departure: Friday, 03 May 2013  
1 room for 1 night

Early check-in cannot be guaranteed. Contact the hotel to inquire about early check-in or late check-out. Hotel check-in time is 3:00 pm and check-out is at 12:00 pm.

### Room and Plan Selection

#### Room:

1 adult  
1 KING BED STUDIO SUITE W/ SOFABED NONSMOKING



Price	179.00
Taxes	29.98
Room Subtotal	208.98
Best Available Rate	

Total for stay: \$208.98 USD

### Guest Information

Guest name:	Merle Gorden
Address type:	Work
Address:	On file
Email:	On file
Phone:	On file

Room preferences: Non-smoking, 1 King bed. Your preferences have been submitted with your reservation and are subject to hotel availability.

### Payment Information

Card type:	MasterCard
Card number:	*****8755
Expiration:	Jan 2014

### Driving directions

**To our hotel:** From I-270 take Exit 33 Easton Way, turn right onto Stelzer Road, hotel is 1/2 mile on right, corner of Morse / Stelzer Rd.

The Hampton Inn & Suites ~ Columbus/Easton offers a complimentary shuttle to and from Port Columbus International Airport, Easton Town Center, and within a 5 mile radius of the hotel. We realize the importance of reliable and affordable travel arrangements!

In order to provide dependable and timely service to all of our guests, we ask that you schedule your airport shuttle needs with our front desk at least 24 hours in advance by calling 614-473-9911. When scheduling your airport pick up, please provide your flight information and a cell phone number. Once you have arrived at Port Columbus International Airport, please call the hotel to let us know you have landed and we will dispatch our driver at that time. You will then proceed to baggage claim level / passenger pick up. Please follow the signs for off site hotel shuttle parking.

**Our shuttle hours:**

Monday – Friday 6am-10pm

Saturday – 8am – 10pm

Sunday - 8am - 10pm

Please schedule local and Easton Town Center shuttles with our front desk. Shuttle services are offered on an availability basis and scheduled times are not a guarantee. Please allow a minimum of 10-15 additional minutes from scheduled time.

Shuttle Drivers cell phone # (614) 395-8649

Thank you for choosing the Hampton Inn & Suites Columbus/Easton

for your lodging needs! We look forward to serving you!

**From Port Columbus International Airport:** Take International Gateway to Stelzer Road, make a right onto Stelzer Road, five miles hotel is on the right.

### Rules & Restrictions

#### Taxes

- 16.75 % per room per night

#### Guarantee Policy

There is a Credit Card required for this reservation.

If you use a debit/credit card to check in, a hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such hold may not be released for 72 hours from the date of check-out or longer at the discretion of your card issuer.

#### Cancellation Policy

If you wish to cancel, please do so 24 hours prior to arrival to avoid cancellation penalties.

At check in, the front desk will verify your check-out date. Rates quoted are based on check-in date and length of stay. Should you choose to depart early, price is subject to change.

We reserve the right to cancel or modify reservations where it appears that a customer has engaged in fraudulent or inappropriate activity or under other circumstances where it appears that the reservations contain or resulted from a mistake or error.

Totals listed here are estimated based on current taxes and exchange rates (if applicable) and do not include additional fees/charges that may be incurred during your stay.

#### Services provided for an additional charge

- Parking charges: Self parking - Complimentary, Complimentary.
  - In-Room Wireless Internet: Complimentary
  - In-Room Wired Internet: Complimentary
  - Public Wireless Internet: Complimentary
-

Business Expense Detail Form

Date

5-6-13

Vendor

Staples

Amount

\$ 19.95

~~Public Purpose of Meeting~~

Office Supplies

~~Attendees (First Name and Last Name)~~

Mayor Merle S. Gordon

Approval Signature

Merle S. Gordon

Attach Receipt Here

**STAPLES**

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5950 Mayfield Rd.

Mayfield Heights, OH 44124

(440) 684-0302

SALE 1648474 3 003 01168  
0669 05/06/13 01:48  
QTY SKU PRICE

REWARDS NUMBER 2111277741

1	DOUBLE ZIPPER MESH	
	068488034122	5.00N
1	ARC POLY ZIP POCKE	
	718103156110	2.99N
1	ARC POLY TAB DVDR	
	718103156103	2.99N
1	ARC TO DO REFILL P	
	718103140003	2.99N
1	ARC TO DO REFILL P	
	718103140003	2.99N
1	ARC TO DO REFILL P	
	718103140003	2.99N
SUBTOTAL		19.95

Tax Exempt Number 4229377223

TOTAL *Mike S. Smith* \$19.95

MasterCard 19.95  
Card No.: XXXXXXXXXXXX8755 [S]  
Auth No.: 04613Z

**TOTAL ITEMS 6**

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Business Expense Detail Form

Date 5-6-13

Vendor Jack's Deli

Amount \$ 133.92

Public Purpose of Meeting dinner prior to Economic

Development Committee + Council meetings

Attendees ( First Name and Last Name) Mayor Merle S. Gorden

Council, Margaret Cannon, Karen Naralonic

Merle S. Gorden  
Approval Signature

Attach Receipt Here

Attached

JACK'S DELI

Date: 5/6/2013 Time: 3:46:18 PM

Status: Approved

Card Type: Master Card  
Card Number: XXXXXXXXXXXX8755  
Expiration Date:  
Swipe/Manual: Manual

Server ID: 174  
Server Name: Sylvia  
Check Number: 9167

Check Name:

Tab Number: 1230  
Profit Center ID: 4  
Profit Center: Carry Out Sales  
Number Of Covers: 1  
Persons: 1  
Card Number: XXXXXXXXXXXX8755  
Card Owner: Manual Ent

AMOUNT 133.92

TIP \_\_\_\_\_

TOTAL \_\_\_\_\_

Approval 95327

I AGREE TO COMPLY WITH  
THE CARDHOLDER AGREEMENT

Customer Signature  
CUSTOMER COPY



**Fax Cover – Order Needed TODAY**  
**Monday, May 6, 2013**

**Please deliver by 4:00 p.m.**

To: Jack's Deli  
Fax: 216-691-6837 / 1 page  
Date: May 6, 2013  
From: City of Beachwood Mayor's Office – 25325 Fairmount  
Boulevard, 2<sup>nd</sup> Floor, Beachwood, OH 44122  
Ph: 216-292-1902  
Fx: 216-292-1984

**DINNER ORDER:**

**ALL dressings and condiments on the side, pickles for 6, and 4 slices of tomatoes needed.**

1 Kathy's Cobb Salad – no onion

**Please wrap the following sandwiches in halves:**  
4 Extra Lean Corned Beef Sandwiches

1 Turkey off Bone Sandwich on Wheat

1 Turkey off Bone Sandwich on RYE

**Please wrap the following items as marked:**

1 Turkey off Bone Sandwich on White Challah, No Seeds, No Lettuce, No Tomato – please initial **[MM]**

1 Chicken Caesar Wrap – please initial **[MJ]**

1 Large Caesar Salad with Chicken / dressing on side – please initial **[MAC]**

1 Large Caesar Salad – no meat/dressing on side – please initial **[KN]**

1 Quart of Potato Salad \$10.18

1 Pint of Cole Slaw 4.89

1 Quart of Mushroom Barley Soup w/6 paper bowls

Call for MasterCard No.

**Please bring receipt!**

01/14

11/21/77 192

Business Expense Detail Form

Date

5-7-13

Vendor

Moxie

Amount

\$ 56.57

Public Purpose of Meeting

GENERAL REVIEW  
OF L.D. OPERATIONS & GENERAL  
UPDATE.

Attendees (First Name and Last Name)

Mayor Merle S. Gorden

William Hannah

Merle S. Gorden  
Approval Signature

Attach Receipt

Moxie/Red  
3355 Richmond Road  
Cleveland, Ohio

60 Joshua H

Tbl 25/1 Chk 1271 Gst 2  
May07'13 12:21PM

1 Tomato Bisque	4.00
1 Soup du Jour	4.00
2 Cobb Salad	23.50
1 add chix	2.50
1 add salmon	4.25
2 *Soft Drink	5.90

Subtotal	44.15
TAX	3.42
Amount Due	47.57

\*\*\* CREDIT CARD VOUCHER \*\*\*

Moxie

3355 Richmond Road  
Cleveland, Ohio (216 ) 831-5599

\*\*\*\*\*

Date: May07'13 01:27PM

Card Type: Master Card

Acct #: XXXXXXXXXXXX8755

Card Entry: SWIPED

Trans Type: PURCHASE

Auth Code: 01311Z

Check: 1271

Table: 25/1

Server: 60 Joshua H

Subtotal: 47.57

Gratuity: 9.00

Total: 56.57

Signature:

Merle S. Gorden

\*\*\*\* Customer Copy \*\*\*\*

Business Expense Detail Form

Date

5-7-13

Vendor

Manistota

Amount

\$ 60.32

Public Purpose of Meeting

UPDATE ON CHAMBER

OPERATIONS

Attendees ( First Name and Last Name)

Mayor Merle S. Gorden

Michael Gray Wayne Lawrence Heather Villmo

Approval Signature

Attach Receipt Here

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
26300 HARVARD ROAD  
WARRENSVILLE HTS., OHIO 44122

CHECK: 1396  
TABLE: 43/1  
SERVER: 34 Princeton  
DATE: MAY07'13 8:55AM  
CARD TYPE: M/C  
ACCT #: XXXXXXXXXXXX8755  
EXP DATE: XX/XX  
AUTH CODE: 03530Z  
MAYOR GORDEN

SUBTOTAL: 50.32

TIP: 10.00

TOTAL: 60.32

CUSTOMER SIGNATURE

I AGREE TO PAY ABOVE TOTAL  
AMOUNT ACCORDING TO MY CARD  
ISSUER AGREEMENT  
\*KEEP ONE COPY FOR YOUR RECORDS\*

MARRIOTT CLEVELAND EAST  
RIVER CITY GRILLE RESTAURANT  
WARRENSVILLE HTS, OHIO 44122  
34 Princeton

43/1 1396 GST 4  
MAY07'13 7:43AM

1 HAM & CHEDDAR	11.25
1 EGG WHITE OMELET	11.75
1 DENVER OMELET	11.75
1 ALL AMERICAN	11.95
SUBTOTAL	46.70
TAX	3.62
PAYMENT DUE	\$50.32

Gratuity: \_\_\_\_\_

TOTAL: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ROOM #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGN ABOVE FOR ROOM CHARGES ONLY